

PUBLIC RELATIONS CLEARANCE FORM

The Wyoming Valley Children’s Association frequently has photographs or video taken of students participating in their programs, special events and during fundraising campaigns.

The media is then used in all media outlets including local newspapers, in agency displays used for public awareness, WVCA’s website, marketing materials and on the WVCA social media sites (Facebook, Instagram, Class DoJo, etc.) Occasionally, the television media features Wyoming Valley Children’s Associations’ services and programs for local showing.

To include your child in these photographs and/or videos and use his/her name, please sign and return this from. We appreciate your cooperation in helping us to tell others about the services provided at the agency.

____ Yes, I approve.

____ No, I choose not to participate in having my child photographed or on video.

CHILD’S NAME: _____ DATE: _____

SIGNATURE OF PARENT OR GUARDIAN: _____

RELEASE AND CONSENT AGREEMENT

I hereby grant to Wyoming Valley Children’s Association (“WVCA”) the irrevocable right and permission to copyright a photograph/video of me and/or my child; and/or a quotation from me, my testimonial and/or other information in its own name or otherwise to use, re-use, publish, and re-publish, and otherwise reproduce, modify and display the photograph/videos, quotation, my testimonial and/or other information in whole or in part, individually or in conjunction with other photographs, quotations my testimonial and/or other information and to use my name in connection therewith if it so chooses. Use of the photograph/video, quotations my testimonial and/or other information includes digital imaging, reproduction and/or use on the websites for our programs, which are accessible globally. I hereby release and discharge WVCA release, defend, and hold harmless WVCA and its programs and its agents or employees, from and against any claims, damages or liability arising from or related to the use of the photographs, interviews my testimonial and/or other information used by WVCA and/or the media.

WVCA may assign, license or otherwise transfer all rights granted to it hereunder. This authorization and release shall also inure to the benefit of the legal representatives, licensees, and assignees of WVCA. I am of full age (eighteen and older) and have the right to contract in my own name. I have read the foregoing and fully understand the contents of this Release. This Release shall be binding upon me and my heirs, legal representatives, and assignees.

Child’s Name

(Authorized Parent/Guardian Signature & Date)

(Printed Name Parent /Guardian)