

Photo/Video Release Form

AUTHORIZATION TO USE PHOTOGRAPHS AND/OR AUDIO-VISUAL

I, _____, hereby authorize Spark the Change Colorado (STCC), 501(c)3, STCC sponsors, and/or STCC clients to use, reproduce, and/or publish photographs and/or video that may pertain to me—including my image, likeness and/or voice without compensation. I understand that this material may be used in various publications, public affairs releases, recruitment materials, broadcast public service advertising (PSAs) or for other related endeavors.

This material may also appear on STCC's, STCC sponsors', and/or STCC's clients' Internet Web Pages and social media. This authorization is continuous and may only be withdrawn by my specific rescission of this authorization. Consequently, STCC, STCC sponsors, and STCC clients may publish materials, use my name, photograph, and/or make reference to me in any manner that STCC, STCC sponsors, and STCC clients deem appropriate in order to promote/publicize service opportunities.

Signed

Print Name

Date

IF UNDER THE AGE OF 18:

I, _____, legal guardian of, _____, hereby give my permission to STCC to use my child's video/image for STCC's internal and/or external use on their websites, social media, and/or for publications.

Signed

Print Name

Date

Phone or Email

