

Donor Media Release Consent Form

Donor Name

Email Address

Phone Number

Address

I hereby grant permission to (nonprofit organization) to use my name, photograph, image, likeness, and/or testimonial in any and all of its publications, including website entries, social media, and other promotional materials, without payment or other consideration. I understand and agree that these materials will become the property of the organization and will not be returned.

I hereby irrevocably authorize to edit, alter, copy, exhibit, publish, or distribute any media for purposes of publicizing or promoting the organization's mission or for any other lawful purpose. In addition, I waive any right to inspect or approve the finished product wherein my likeness appears.

I have read this release before signing, and I fully understand its contents, meaning, and impact.

Donor Signature

Date