

Volunteer Photo/Video Consent Form

Volunteer's Name

Organization Name

Project/Event Name

Contact Information

Consent

I hereby grant permission to the above organization to use photographs and/or video taken of me during the above-named project/event for use in publications, news releases, online, and in other communications related to the mission of the organization.

I consent to the use of my photo/video as described above.

I do NOT consent to the use of my photo/video.

Signature of Volunteer

Date

If Under 18, Parent/Guardian Name

Signature of Parent/Guardian

Date

Notes/Restrictions

