

Corporate Training Session Media Release Form

I hereby grant permission to record my image, likeness, or voice during the training session and use these recordings or photographs for any lawful purpose, including publicity, illustration, advertising, and web content.

Participant Name

Session Name/Title

Date

Department/Organization

Photo

Video

Audio

Other (please specify)

Additional Notes or Restrictions

Participant Signature

Date

Parent/Guardian Signature (if under 18)

Date