

## Release Form for Media Recording

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I, the undersigned, do hereby consent and agree that the **GFWC** \_\_\_\_\_ and its members have the right to take photographs, videotape, or digital recordings of me and to use these in any and all media, now or hereafter known, and exclusively for the purpose of promoting the General Federation of Women's Clubs and the Florida Federation of Women's Clubs. I further consent that my name and identity may be revealed therein or by descriptive text or commentary.

I do hereby release to **GFWC** \_\_\_\_\_ and its members all rights to exhibit this work in print and electronic form publicly or privately. I waive any rights, claims, or interest I may have to control the use of my identity or likeness in whatever media used.

I understand that there will be no financial or other remuneration for recording me, either for initial or subsequent transmission or playback.

I represent that I am at least 18 years of age, have read and understand the foregoing statement, and am competent to execute this agreement.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Witness for the undersigned: \_\_\_\_\_

Signature: \_\_\_\_\_