



The Salvation Army–New Jersey Division
 4 Gary Rd, Union NJ 07083

MEDIA CONSENT AND RELEASE

In connection with _____

I, _____, hereby grant consent to The Salvation Army to obtain and/or record my likeness and/or voice in one or more photographs, videos, other forms of digital media and/or combination thereof (“Media”) and to use such Media in any or all of its publications, including without limitation, web-based publications, without payment or other consideration.

I acknowledge and agree that all such Media shall be the property of The Salvation Army when created and will not be returned.

I hereby grant to The Salvation Army the irrevocable right to edit, alter, copy, exhibit, publish, or distribute the Media for any lawful purpose. In addition, I waive any right to inspect or approve the finished product wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the Media.

I hereby hold harmless, release, and forever discharge The Salvation Army from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this consent and release.

BY SIGNING MY NAME BELOW I AM ACKNOWLEDGING THAT I HAVE READ, UNDERSTAND AND DO NOW ACCEPT THE ABOVE MEDIA CONSENT AND RELEASE; THAT I AM AT LEAST 18 YEARS OF AGE, OR, IF I AM UNDER 18 YEARS OF AGE, I HAVE OBTAINED THE REQUIRED CONSENT OF MY PARENTS/GUARDIANS AS EVIDENCED BY THEIR SIGNATURES BELOW.

Print Name: _____ E-mail: _____

Signature: _____ Date: _____

AUTHORIZATION RELATING TO A MINOR OR INDIVIDUAL UNDER LEGAL GUARDIANSHIP

I certify that I am the parent/legal guardian of _____ and have executed this release on his/her behalf.

Print Name: _____ E-mail: _____

Signature: _____ Date: _____