

Media Consent Form

l, _	, agree to allow the
	(please print name of participant/volunteer)
	Timmins Youth Wellness Hub ("Timmins YWH"), it's employees, volunteers, agents and
	gns, unlimited permission to use, publish and republish in any form or media, now and in future (check all the apply)
	My name or other information about the agencies work with me,
	Reproductions of my likeness in photos, videos, web etc,
	My voice
web pur with the any	ectively, the "information" in Canada and abroad, in forms including but not limited to: osites, newsletters, posters, public marketing materials and historical archives, for the pose of fundraising, reporting or promoting the Timmins YWH activities, in accordance in the Timmins YWH mission, vision and principles. I waive any rights to inspect or approve final materials. I agree that I shall have no claim against the Timmins YWH or against rone using the Information.
Nan	ne (please print):
Sign	nature:
Ema	ail:
Date	e: Telephone: ()
lf uı	nder 18 years of age, we require permission from a parent or guardian:
Pare	ent/Guardian (please print):
Sign	nature:
Date	e: Telephone: <u>()</u>