



MEDIA RELEASE FORM

This form is to be completed by an Adult member (including Daughters over the age of 18 years) when giving permission for publication of their own personal information or images.

This form is to be completed by an Adult Guardian for any child under the age of 18 years when giving permission for publication of the child's personal information or image.

I hereby grant permission to Job's Daughters International and its subordinates to use my name* and/or photographic images of me* for use in Job's Daughters International publications such as recruiting brochures, newsletters, and magazines, and to use my name* and/or photographic images of me* on display boards, and to use my name* and/or photographic images of me* in electronic versions of the same publications or on the Job's Daughters International web site or subordinate web sites or other electronic forms or media.

I hereby waive any right to inspect or approve the finished photographic image or printed or electronic media that may be used in conjunction with them now or in the future, whether that use is known to me or unknown, and I waive any right to royalties or other compensation arising from or related to the use of the photographic image.

I hereby agree to release, defend and hold harmless Job's Daughters International and subordinates, including any firm publishing and/or distributing the finished product on behalf of Job's Daughters International or subordinates, in whole or in part, whether on paper or via electronic media, from and against any claims, damages or liability arising from or related to the use of the photographic images, including but not limited to any misuse, distortion, blurring, alteration, optical illusion or use in composite form, either intentionally or otherwise, that may occur or be produced in taking, processing, reduction and/or production of the finished product, its publication or distribution.

Please tick the appropriate paragraph, complete the required information and sign:

- I am 18 years of age or older and I am competent to contract in my own name. I have read this release before signing below, and I fully understand the contents, meaning and impact of this release. I understand that I am free to address any specific questions regarding this release by submitting those questions in writing prior to signing, and I agree that my failure to do so will be interpreted as a free and knowledgeable acceptance of the terms of this release.

Bethel Number:	Bethel Name:	
Name:	Signature:	Date:

- I am the Parent or Legal Guardian of the child named below. I have read this release before signing below, and I fully understand the contents, meaning and impact of this release. I understand that I am free to address any specific questions regarding this release by submitting those questions in writing prior to signing, and I agree that my failure to do so will be interpreted as a free and knowledgeable acceptance of the terms of this release.

Bethel Number:	Bethel Name:	
Name of Child (in full):		
Name of Parent/Legal Guardian (in full):		
Signature:		Date:

This release is intended to allow you to give permission for the publication of both your photograph and your name. Please cross out and initial references to " photograph of me" or "my name" if you do not give permission for the use of either one.

(For example, if you give approval to have your photograph published but not your name, please put a line through the references to "my name" and place your initials in the margin beside the paragraph.

This Media Release will remain in effect until such time as a more recently signed form is lodged with the Jurisdictional Secretary.