



Where choices change the lives
of people with an intellectual disability

PUBLICITY AND RELEASE FORM

I hereby authorize my name, likeness, image, voice, interview, and performance to be used for the education, public relations and fundraising purposes of the Association. I also authorize pictures (photographs/videotape/film) of myself to be taken for these purposes.

I understand that some examples of such uses are: the Annual Report, Profile News Magazine, brochures, slide shows, videotapes, displays, posters or billboards, releases to newspapers, Community Living Toronto's Corporate or Connect **ABILITY** web sites, DVD production and television stations. My consent is for such purposes as the Association may consider appropriate, and is not limited to these examples.

Name _____ Date _____

Location _____

(signature)

(signature of Witness)

Date: _____

Date: _____

Address: _____

Phone: _____

Email: _____

In the event that an individual is under 18 years of age or lacks the capacity to give consent or lacks the ability to understand the issue of consenting to publicity, consent of the parent or legal guardian is required.

I hereby state that I am the legal guardian of the above-mentioned individual and give consent for this person to be involved in Community Living Toronto publicity as stated.

(signature of Guardian)

(signature of Witness)

Date: _____

Date: _____