



Big Brothers Big Sisters of Cambridge

MEDIA CONSENT FORM – VOLUNTEER

I, _____, hereby consent to Big Brothers Big Sisters of Cambridge to use any photographs, audio and/or video recordings of myself as taken or produced by media personnel and/or Agency Members and or Agency staff for the purpose of publicizing and promoting the work of the Agency. I further waive any claim which I may have against Big Brothers Big Sisters of Cambridge arising from the use of such photographs, audio and/or video recordings of myself, as aforesaid.

This consent and waiver shall remain in effect for the duration of my involvement with Big Brothers Big Sisters of Cambridge unless otherwise revoked.

Date

Signature of Volunteer

Date

Signature of Witness

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### **Note: Confidentiality concern RE: Media Consent**

If you do not want your picture to be used, please check here:

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

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

Note: It is your responsibility to notify the office if the status of this consent changes.