

Public Affairs Department 12 MetroTech Center, 29th Fl. Brooklyn, NY 11201 www.heartshare.org

MEDIA CONSENT FORM

I/We,	, residing at
	, am/are the parent(s)/guardian(s) of
	(referred to as "my child"). We participate in
progra	ıms and activities with HeartShare Human Services of New York and its affiliates –
HeartS	Share Education Center (The HeartShare School), HeartShare Wellness and HeartShare St.
Vince	nt's Services.
I/We h	ereby consent that photographs and video taken of my child, on behalf of HeartShare Human
Service	es of New York, may be used for the following purposes: (select all that you grant permission for)
	HeartShare Annual Report
	HeartShare newsletters, including InSights and Heart to Heart
	HeartShare and HeartShare affiliate websites
	Social media websites, including, but not limited to, Facebook, Instagram, Tumblr, Twitter, and
	YouTube.
	Press releases from HeartShare for print or broadcast media. These may include newspaper or
	magazine articles, radio and television interviews and/or features, publications
	Advertisements for HeartShare
	Information materials, such as, but not limited to, agency brochures, videos, and photo and
	audiovisual information displays
	Everyday Heroes Program
<u>or</u>	
	Only internal program use (i.e. classrooms, hallways); do not use externally
I/We co	onsent to the use of our names and association with HeartShare for the foregoing purposes. I/We
give th	is authorization without incurring any financial or moral obligations to my child or
myself	ourselves and without any remuneration to my child or myself/ourselves.
Signatu	ure(s): Date:
Witnes	s: Date: