**PHOTO/VIDEO/IMAGING CONSENT FORM**

**Participant’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Check: Mentor\_\_\_\_Student\_\_\_\_Parent\_\_\_\_Community Volunteer\_\_\_\_**

**Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**I hereby give my consent for photographing, videotaping, filming, or other recording during the activities of the Mountain Mentors program, without compensation or liability, to be used for the following purposes:**

* **Mountain Mentors or Northwest Ohio Community Shares**

 **Marketing or Publicity Purposes**

* **Mountain Mentors Newsletters**
* **Mountain Mentors Website**
* **Interviews with News Media**
* **Educational Purposes**
* **Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Adult Participant or Minor’s Parent/Legal Representative**