

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

## MEDIA CONSENT FORM

### Soroptimist Media Consent Form

As a *Live Your Dream Awards* recipient, your story is truly inspiring. When we promote the *Live Your Dream Awards*, we often use stories of past award recipients. The reasons we share these stories are to 1) encourage more women to apply for the *Live Your Dream Award*, 2) attract donors and corporate sponsors so that we can provide even more deserving women with cash grants through this program, 3) further honor recipients by telling their inspiring stories of perseverance and achievement, 4) attract media attention and grow recognition for SIA, and 5) raise funds for SIA. Allowing us to share your story for these purposes is purely voluntary. Please read and sign this copy of our media consent form if you allow us to share your story.

By signing this media consent form, you give to Soroptimist International of the Americas Inc. and all affiliated and associated entities and organizations including without limitation LiveYourDream.org (collectively “SIA”), permission to take photographs and make videotapes and voice recordings of the undersigned (the “Presenter”) and grant SIA the unlimited and perpetual right to reproduce, display, communicate, perform, distribute, publish, circulate, make derivative works, or otherwise use Presenter’s:

**Name** (please check one of the following):

- My (Presenter’s) full name (first and last)
- My first name, but only the first letter of Presenter’s last name
- Only my Presenter’s first name, but not Presenter’s last name or initial
- Pseudonym – i.e., not my real first or last name. Please let us know if there is a specific name you would like to use, otherwise SIA will choose one on its own: \_\_\_\_\_ (preferred pseudonym)

**as well as Presenter’s** (check all that apply):

- My photographs, videos, likeness, images and/or voice
- My biographical details – i.e., age, disability, ethnicity, gender
- Information on my story/life experiences, submitted by me in written or other form
- Testimonials and quotes about the impact of the *Live Your Dream Award* I received
- My city and province of residence

The items ticked above are collectively referred to as the “**Works**”) in whole or in part, for publicity purposes, fund raising appeals, advertisements and otherwise in connection with the mission of SIA, in various formats including, but not limited to, print, photographs, video recordings, and audio recordings in any and all media including but not limited to print media, social media, websites, television, audiovisual and electronic media (collectively “**Media**”). All such Works shall be the property of SIA, which shall own all right, title and interest.

Without limiting the above, the Presenter consents to SIA’s use and disclosure of the personal information contained in the Works or otherwise provided by the Presenter to SIA (“**Personal Information**”), including sensitive Personal Information, for the purposes outlined above. The Presenter understands that:

SIA may use and disclose the Personal Information, including the Presenter’s personal story, testimonials, and information on her life experiences, for promotional purposes on the Internet, in the Media or otherwise.

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

Even if the Presenter has elected for SIA to use a Pseudonym instead of all or part of her real name, it is possible that the Presenter could be recognized based on her image, voice, biographical details, location information, testimonials and/or the description of her story/life experiences.

Information disclosed by SIA will be available to the public. Corporate partners and marketing firms, and may be re-disclosed by any recipient or other third party, and SIA may not be able to control the use or disclosure of the Presenter's Personal Information by such third parties.

The Presenter's Personal Information will be stored in locked filing cabinet and accessible to staff designated to prepare stories for the reasons listed in the first paragraph on page 1 and who have a need to know such information to perform their job duties. The Personal Information could be transmitted, stored and published in the 122 countries comprising Soroptimist International, for the purposes outlined above. Information transferred to other countries may be accessed by the courts, law enforcement and national security authorities in the jurisdiction(s) where it is transferred, processed or stored.

Without limiting the above, the Presenter hereby waives all rights of publicity and privacy which the Presenter may have in the Works and any right or option to inspect or approve the finished product or advertising or other copy that may be used along with the Works. The Presenter hereby waives and releases any claims the Presenter now has or in the future may have against SIA (and the other releasees mentioned below) relating to or arising out of the use of the Works and/or the use and disclosure of the Presenter's Personal Information as described above, including, without limitation, any claims for compensation for the use of such materials.

This consent and release shall be applicable to SIA as well as its and their officers and directors and other agents or employees who may be involved in disseminating the Works, and to the photographer, the videographer, the advertising agency or publisher of any material in which the Works may be used. The Presenter also understands that any use, including the broadcast and publication, of the Works is within the sole discretion of SIA and that they may not be used at all.

The Presenter may withdraw consent to SIA's continued use and disclosure of Personal Information contained in the Works at any time. However, please note that such withdrawal will not have retroactive effect, and SIA cannot control continued or further distribution of Personal Information by third parties, to the extent that such Personal Information has already been published or otherwise made available to persons outside SIA's control. The Presenter may contact SIA Program Director to withdraw consent, or to access, correct or update Personal Information, as well as to obtain written information or make enquiries about SIA's privacy policies and practices including use of service providers (including affiliates) outside Canada. NAME: (Print name)

\_\_\_\_\_

Check one:

- ( ) The individual represents that he/she has reached his/her 18<sup>th</sup> birthday and signs below.  
( ) The undersigned is a minor person and his/her parent guardian has signed this form where indicated.

Dated: \_\_\_\_\_

By: (Print name) \_\_\_\_\_ (Signature) \_\_\_\_\_

WITNESS (Print name) \_\_\_\_\_

(Signature) \_\_\_\_\_

(Address) \_\_\_\_\_

\_\_\_\_\_

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

If above person is under 18 years of age:

**CONSENT AND APPROVAL OF PARENT OR GUARDIAN**

The undersigned represents that he/she is a parent or guardian of the above named minor, that he/she has the legal right to consent to the terms of this Media Consent, that he/she has read the foregoing instrument and that he/she for and on behalf of the said minor, and in his/her own capacity, consents to, accepts and approves this Media Consent and releases SIA and the other persons to whom the release is applicable, from any claim or liability with respect to the said creation and use of the Works as set out herein.

Dated: \_\_\_\_\_

By: (Print name) \_\_\_\_\_

(Signature) \_\_\_\_\_ (Relationship) \_\_\_\_\_

WITNESS: (Print name) \_\_\_\_\_ (Signature) \_\_\_\_\_

Address \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

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

