

ORGANIZATION: _

CONTACT EMAIL: NUMBER OF VOLUNTEERS:		
PHOTO RELEASE		
 As a participant at TCV Food Bank (Tri-City Volunteers), I understand that photographs and/ or video may be taken in an effort to promote the organization to the general public. I will grant TCV Food Bank the following rights: 1. TCV Food Bank will have total ownership of these materials, and the right to edit and use for purposes of program promotion, advertising, or public relations. 2. Should TCV Food Bank use my name, likeness, or voice it will not result in any liability to TCV Food Bank for payment to any person or organization. 		
Signature	Date	
If group members are under 18 years of age, a parent/guardian/chaperone must also sign below.		
I represent that I am the parent/guardian/chaperone of the minors in the above release and that in that capacity TCV Food Bank has my consent and authorization to use the name and/or likeness as described above.		
Parent/Guardian/Chaperone:		
Signature	Date	

LIABILITY WAIVER

I agree to relieve TCV Food Bank (Tri-City Volunteers) of all responsibility of liability during my team's Community Service. I waive any and all claims for accident or injury or compensation of any kind relating to our volunteer work against TCV Food Bank (Tri-City Volunteers, Inc.)

Signature	Date
Parent/Guardian/Chaperone Signature	Date