



Volunteer Photo Release Form

I authorize Chilliwack Community Services (“CCS”), its employees, and agents to do the following:

1. Photograph, film, or otherwise reproduce my photo or likeness;
2. Publish, exhibit, and otherwise use my photo or likeness in any manner that CCS deems appropriate, including publication of my photo or likeness in print form or on the Internet, without payment to me.

The following items are what I acknowledge CCS to use my photo or likeness for:

- Staff Photos
- Social Media
- Print Media

I acknowledge and agree that:

1. I have waived any rights regarding the lawful use of my likeness by CCS as described above;
2. I have waived any right to inspect or approve reproductions of my photo or likeness before they are used by CCS;
3. CCS cannot control the unauthorized use by other persons of my photo or likeness once it has been published and made public;
4. CCS will not be responsible for any unauthorized use by other persons of my published name, photo or likeness after it has been published and made public;
5. All material CCS creates using my photo or likeness will be the sole property of CCS.

I _____ **agree** and accept these terms on _____
(Volunteer name) (dd/mm/yyyy)

I _____ **do not agree** and do not accept
these terms on _____
(Volunteer name) (dd/mm/yyyy)

Signature of Volunteer _____
(Parent or Guardian if volunteer is a minor)

Phone Number _____

Signature of Witness _____

Print name of Witness _____