



HILLSIDE

Fostering Abilities - Creating Community

CONSENT FOR PHOTO/VIDEO RELEASE

I, the undersigned, give my consent to be photographed and videotaped while performing my regular volunteer duties at Hillside.

I understand that the photographs and/or video footage may be used publicly or commercially without me being made aware prior.

I understand that photos may be used on display at Hillside.

Volunteer Signature

Printed

Date