



Media Release Form

I, (please print) _____, give my consent to the Food Bank of Northeast Georgia for interview content, photographs, film, video, or sound recording. I further consent such information, photographs or recordings may be used in publications, promotional materials, advertisements, news releases, film, video, blogs, websites, sound productions and other marketing purposes, as directed and approved by the Food Bank of Northeast Georgia without providing monetary or other compensation to above named person or their family or heirs.

Signature: _____

Date: _____

FOR SUBJECTS UNDER 18 YEARS OLD

I, (Guardian's name, please print) _____, give my consent to the Food Bank of Northeast Georgia for interview content, photographs, film, video, or sound recording of my child, (child's name, please print) _____. I further consent such information, photographs or recordings may be used in publications, promotional materials, advertisements, news releases, film, video, blogs, websites, sound productions and other marketing purposes, as directed and approved by the Food Bank of Northeast Georgia without providing monetary or other compensation to above named person or their family or heirs.

Guardian Signature: _____

Date: _____

Please state how you (or your dependent) would like to be referred to in the aforementioned content. (examples include: First name only with age, Full Name, Pseudonym): _____

For any questions, please contact:

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