

# Publication, video and website consent and release agreement

**We seek permission to use your photo, name, voice, statement, written work and/or art**



Employment Security Department and WorkSource employees and partners, Washington Service Corps members and members of the public are occasionally asked to be a part of publicity, publications, and/or public relations activities, which may include representation in the media.

This signed form indicates agreement that the subject's name, picture, art, written work, voice, verbal statements and/or portraits (video or still) may appear in the department's publications, videos and/or website, or in print, social or broadcast media. These images may or may not personally identify the subject. The subject also agrees that:

- No money shall be paid.
- Consent and release have been given willingly.
- The name, picture, art, written work, voice, verbal statements, portraits (video or still) may be used in the future.

Employment Security, WorkSource and its partners, and Washington Service Corps agree that the subject's name, picture, art, written work, voice, verbal statements and/or portraits (video or still) shall be used only for public relations, public information, event or project promotion, publicity and instruction.

If the subject or, in the case of a minor child, parent or guardian wish to rescind this agreement, he or she may do so at any time with written notice.

## Release agreement

## Agreement

I authorize the Washington State Employment Security Department to use my name, voice, verbal statements, and/or any photographs, film, digital recording or videotape that may contain my likeness, for publicity or informational purposes. This includes the editing, duplication, reproduction, copyright, representation in the media, exhibition, broadcast, posting on Employment Security's websites or social-media sites, Washington Service Corps' website or social-media sites, WorkSource branded sites and/or other non-profit use and distribution of such photographs for purposes deemed suitable by Employment Security, unless I make my wishes to the contrary known. I understand that my image or information that I provide may be used

## Please sign here

_____	_____
Subject (print name)	Signature of subject
_____	_____
Date	Phone number

## Please complete this section for minors

*If subject is a minor child (less than 18 years old), complete the following section.*

_____	_____	
Guardian (print name)	Signature of guardian	
_____	_____	
Minor (print name)	Date	Phone number