

Permission and Consent Form

TEEN PARTICIPANT CONSENT:

- I agree to participate in the Women's Fund Girls' Grantmaking Project on March 13 and April 17, 2013. **Attendance at both sessions is important to the project.**
- I agree to be an active and respectful participant in the Girls' Grantmaking Project.
- I understand that it is my responsibility to make up any school work missed because of my participation in this project.

Teen Participant Signature Teen Participant Printed Name Date

PARENTS/GUARDIAN CONSENT:

- By signing below, I/We consent to have our daughter _____ (print name) participate in the Women's Fund Girls' Grantmaking Project on March 13 and April 17, 2013.
- I/We understand that we are responsible to provide or arrange transportation for our daughter to the meeting location at Youth Go, 213 Nicolet Blvd., Neenah. Off-street parking is available next to the building. (Please let the Women's Fund know if transportation assistance is needed.)
- I/We understand that we are responsible to inform our daughter's school to report her absence from school as necessary to participate in the Girls Grantmaking Project.

Parent/Guardian Signature Parent/Guardian Printed Name Date

Parent/Guardian Daytime Phone Parent/Guardian Cell Phone

Please complete your permission and consent form and return it to the Women's Fund by Friday, March 8, 2013. Forms should be returned to: Women's Fund, 4455 W. Lawrence Street, Appleton, WI 54914.

If you have questions please call Becky Boulanger at (920) 830-1290, ext. 17 or email bboulanger@womensfundfvr.org.



PHOTOGRAPH AND VIDEO RELEASE FORM

I grant permission to the Women's Fund for the Fox Valley Region, Inc. and its agents to use photographs or videotape of me, or photographs or videotape I have provided to them.

I give this permission with the understanding that these photographs or video may be used by the Women's Fund for the Fox Valley Region's in any media, including, but not limited to, print pieces, electronic communications, website, or social media spaces. I waive any right to inspect or approve any photographs or video, or any printed or electronic matter in which they appear.

I also understand that these photographs or video may be viewed by a wide variety of audiences and may be used for a variety of purposes, including advertising and promotion. I understand that these photographs or video may be used for an unlimited time.

I have read this release form prior to signing it and I understand its content.

Signed _____

Name _____
(Please Print)

Date _____

Email _____ Phone _____

If subject is a minor:

Minor's name (please print) _____

Parent/Guardian's Name (please print) _____

Parent/Guardian's Signature _____