



“Voices from the Village”
Village Coalition RACC Project

- What is your story
- What are your strengths
- What do you wish for

THE PHOTO / AUDIO / FILM RELEASE FORM

I hereby grant *The Village Coalition with the RACC Project “Voices from the Villages,”* permission to use my likeness in a photograph, audio, video, or other digital media in any and all publications, including final public presentation and web-based publications. I understand and agree that all photos, audio recordings, and video footage will become the property of *The Village Coalition with the RACC Project “Voices from the Villages and Film Partner: Outside the Frame,* and will be shared freely with you upon request by you and/or your group.

Print Name: _____

Signature: _____ | Date: __ / __ / ____

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