# Compelling Why Media Release Form

## Compelling Why Media Release — Plain Language Summary

When you join a Compelling Why event, we may take photos, videos, or recordings. By signing the release form:

- You give Compelling Why permission to use your name, picture, and voice in these materials.
- These materials may be shared in print, online, or other media to promote Compelling Why programs.
- You won't be paid for this, but your participation helps inspire and empower other students.
- Compelling Why owns the rights to these photos and recordings.
- If you are under 18, your parent or guardian must also sign to give permission.

**In short:** Signing the form means you agree that Compelling Why can use photos or recordings of you to celebrate and share the impact of our programs.

*(READ AND SIGN THE REVERSE SIDE)*

# Compelling Why Media Release Form

**Purpose**

By signing this form, you give *The Compelling Why* ("CW"), a Texas nonprofit, permission to use your name, image, and voice in photos, videos, and other media connected to CW events and programs.

**What You Agree To**

- CW may use your image, name, and voice in any format (photos, videos, audio, online, print, etc.) for any purpose, anywhere, and forever.
- You give up any right to review, approve, or receive payment for how CW uses this content.
- CW owns all rights to the content created.
- You release CW from any claims related to privacy, publicity, copyright, or defamation.
- You confirm you are not restricted by any other agreement that would prevent you from signing this release.

**Adult Consent**

I am at least 18 years old. I have read and understand this release, and I agree to its terms.

| | |
|---|---|
| **Name:** | _____ |
| **Signature:** | _____ |
| **Date:** | _____ |
| **Address:** | _____ |
| **Witness Name:** | _____ |
| **Witness Signature:** | _____ |

**Parent/Guardian Consent (for minors)**

I am the parent or legal guardian of the minor named below. I have the legal right to consent, and I agree to the terms of this release on behalf of my child.

| | |
|---|---|
| **Minor's Name:** | _____ |
| **Parent/Guardian Name:** | _____ |
| **Parent/Guardian Signature:** | _____ |
| **Date:** | _____ |
| **Address:** | _____ |
| **Witness Name:** | _____ |
| **Witness Signature:** | _____ |