

## FORMS

October 14, 2025

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### PHOTO/VIDEO CONSENT

I grant the City of Hallandale Beach permission to use photos/videos of me for official communications.

**Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Event:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

### MEDIA INTAKE

**Requester:** \_\_\_\_\_

**Deadline:** \_\_\_\_\_

**Angle/Focus:** \_\_\_\_\_

**Contact:** \_\_\_\_\_

**Asset Needs:** \_\_\_\_\_

**Approvals:** \_\_\_\_\_

