

**Media Consent and Release Form**

I give Beneficent Technology Inc. (“Benetech”) permission to record my image or statements in photographs, video, audio, transcription, or any other media. I further give Benetech permission to use, publish, edit, or copy such images and comments, in whole or in part, individually or in combination with other material, in any media now or hereafter known, for any legitimate purpose, including promotional and educational purposes. I waive any right that I might have to inspect or approve such images or comments, or the materials in which they might appear. I give Benetech permission to publish the following information about me in connection with such images and comments:

* Full name and, if applicable, organizational affiliation
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* First name only
* Benetech may not publish my name or organizational affiliation

I understand that I will not receive any monetary compensation in return for Benetech’s use of my image or comments. I voluntarily release Benetech, and its officers, directors, employees, agents, and assigns, from any and all liabilities or claims relating to the use of such images or comments.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title/Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Media Consent and Release Form for Minors**

I give Beneficent Technology Inc. (“Benetech”) permission to record my child’s image or statements in photographs, video, audio, transcription, or any other media. I further give Benetech permission to use, publish, edit, or copy such images and comments, in whole or in part, individually or in combination with other material, in any media now or hereafter known, for any legitimate purpose, including promotional and educational purposes. I waive any right that I might have to inspect or approve such images or comments, or the materials in which they might appear. I give Benetech permission to publish the following information about my child in connection with such images and comments:

* Full name and, if applicable, organizational affiliation
* Full name only
* First name only
* Benetech may not publish my child’s name or organizational affiliation

I understand that neither I nor my child will receive any monetary compensation in return for Benetech’s use of such images or comments. I voluntarily release Benetech, and its officers, directors, employees, agents, and assigns, from any and all liabilities or claims relating to the use of such images or comments.

Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email form to: [Communications@benetech.org](mailto:Communications@benetech.org) OR fax to: 650-475-1066 (Attn: Benetech Communications)

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