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PHOTO/VIDEO RELEASE FORM

EACH PRESENTER MUST COMPLETE AND SUBMIT THIS FORM.

Training: 2019 OCADSV Annual Conference

Location: Sunriver Resort (Sunriver, Oregon)

I grant to the Oregon Coalition Against Domestic & Sexual Violence, its representatives and employees the right to take photographs and video of me and my property in connection with the above-identified subject. I authorize the Oregon Coalition Against Domestic & Sexual Violence, its assignees and transferees to copyright, use and publish the same in print and/or electronically.

I agree that the Oregon Coalition Against Domestic & Sexual Violence may use such photographs and video of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and web content.

I have read and understand the above:

Signature: _____

Printed name: _____

Organization: _____

Email: _____

Date: _____

Signature of parent/
guardian (if under 18): _____