

## Media Consent and Release Form for Minors

I am the parent/guardian of \_\_\_\_\_ (print full name of child)(“My Child”).  
I hereby grant permission to the National Asian Pacific American Families Against Substance Abuse, Inc. (NAPAFASA) to take and use photographs and video footage of My Child to promote NAPAFASA and NAPAFASA publications, which include but are not limited to: (1) educational materials, including fact sheets, pamphlets, and reports; (2) the NAPAFASA website; and (3) NAPAFASA social media posts on platforms such as Instagram, Facebook, Twitter, and YouTube.

I hereby release to NAPAFASA all rights to exhibit this work in print and electronic form. I waive any rights, claims, or interest I may have to control the use of my identity or likeness.

I represent that I am at least 18 years old, have read and understand the foregoing statement, and am competent to execute this agreement.

I grant these permissions for media obtained at events listed below:

EVENT DATE

EVENT DESCRIPTION

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### PLEASE CHECK ONE OF THE BOXES BELOW THEN SIGN YOUR NAME

**CONSENT:** I hereby certify that I am the parent(s) or guardian(s) of the above named child and do hereby give my consent without reservation to the foregoing on behalf of My Child.

**NON-CONSENT:** I hereby certify that I am the parent(s) or guardian(s) of the above named child and do not hereby give my consent without reservation to the foregoing on behalf of My Child.

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

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

Parent/Guardian Relationship to Minor: \_\_\_\_\_ Language Spoken at Home: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_