

TRINITY STABLES Horses Healing Hearts, Inc. Media Release Form

I, _____ (Student), grant permission to Trinity Stables Horses Healing Hearts, Inc. 501(c)(3) to use my image (photograph or video) for use in media publications including:
(Check all that apply)

☐ Videos ☐ Email Blasts ☐ Recruiting Brochures ☐ Newsletters
☐ Website ☐ Social Media (Facebook & Instagram)

I hereby waive any right to inspect or approve the finished photographs or electronic matter that may be used in conjunction with them now or in the future, whether that use is known to me or unknown. I waive any rights to royalties or other other compensations arising from or related to the use of the image.

Please **INITIAL** the paragraph below which applies to you.

_____ I (Student) am 18 years of age or older. I have read this release before signing below, and I fully understand the contents and impact of this release. I understand that I am free to address any questions regarding this release by submitting those questions in writing prior to signing, and agree that my failure to do so will be interpreted as a free and knowledgeable acceptance of the terms of this release.

_____ I am the parent or legal guardian of the below named child. I have read this release before signing below, and I fully understand the contents and impact of this release. I understand that I am free to address any questions regarding this release by submitting those questions in writing prior to signing, and agree that my failure to do so will be interpreted as a free and knowledgeable acceptance of the terms of this release.

SIGNATURE: _____ DATE: _____
(Student or Parent/Legal Guardian if Student is under 18)

NAME (Please print): _____

ADDRESS: _____

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A 501(c)3 non-profit charitable organization