



SOROPTIMIST INTERNATIONAL OF DAVIE

Soroptimist International of Davie Media Consent Form

I hereby grant permission to Soroptimist International of Davie to use my name, likeness and/or voice for all publicity purposes and in any media format. Media formats include but are not limited to: newspapers, magazines, television, radio, film, photographs, social media and the internet.

Soroptimist International of Davie shall retain all rights to said materials.

Name (print) _____

If above person is under 18 years of age:

Parent/Guardian Name (print) _____

Signature _____

Address _____

City, State, Zip _____

Phone _____

Email _____

Date _____

Witness Name (Print) _____

Signature _____

Date _____

"Improving the lives of women and girls, in local communities and throughout the world"