



STAFF MEDIA RELEASE FORM 2010

I _____ give my consent to have my
(Print full name)

published in one or more of the following communications vehicles for Family Matters of Greater Washington.

___ Newsletter

___ Website: www.familymattersdc.org

___ Annual Report

___ Brochure/Flyer

___ Event publication

___ Agency Video

___ Direct Mail

___ All of the Above

___ Other _____

Understanding that I do not have to do so, I give this consent voluntarily, and I understand my comments and/or experiences will relate to my involvement with Family Matters. I also release Family Matters from any liability in the event that I voluntarily or inadvertently disclose confidential information.

Signature

Date