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**Media Release Form**

**[Note: For members of a household or family group, a form must be filled out for each person depicted or described in the participant’s story.]**

*General Consent*

I, \_\_\_\_\_, authorize Center on Budget Policy and Priorities (CBPP) and its partner organizations to use my photograph, interview, video and/or personal story to promote the activities of CBPP and its partners and to make it available to the general public via the Internet, television, written materials, sound recordings or any other medium. I agree that distribution of this information has no geographic limitation. I understand that I may be identifiable in such materials.

I understand that CBPP is a nonprofit organization committed to expanding economic opportunity. I have had a chance to review this release before signing below and I fully understand its content and meaning.

Participant’s Signature \_\_\_\_\_

Print Name of Participant \_\_\_\_\_

Date \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone Number \_\_\_\_\_

Email (Optional) \_\_\_\_\_

***Consent for a Minor Child***

*(Required whenever a minor child is involved in the story or image)*

I certify that I am the parent or guardian of \_\_\_\_\_, a minor under the age of eighteen years. I hereby agree to assume legal responsibility for his or her authorizations referred to in the General Consent above.

\_\_\_\_\_  
Signature of Child’s Parent or Guardian

\_\_\_\_\_  
Date