



MEDIA RELEASE FORM

I, _____, grant permission to Answers for Angels and its employees, agents, and volunteers to use my story and/or photo for its future publications, social media, and publicity purposes.

It is my understanding that these testimonials, photographs, videos, and interviews will be available to the public and may or may not be accompanied by my name.

I hereby discharge Answers for Angels, its employees, agents, and volunteers from any claim as well as any liability arising from the use of said testimonials, interviews, photographs, and videos.

I have read this release before signing below and I fully understand the contents and meaning of this release. I understand that I am free to address any specific questions regarding this release by submitting those questions in writing prior to signing.

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Signature _____

Address _____

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