THE PROJECT GIRL FOUNDATION

RECIPIENT AGREEMENT, PHOTO & MEDIA RELEASE

Recipient Name: _____

Program: _____

By signing below, I acknowledge that I have been selected to receive assistance from The Project Girl Foundation.

I agree to:

- Use assistance received for its intended educational or workforce development purpose.
- Provide accurate and truthful information to the Foundation.
- Notify the Foundation if my enrollment or participation status changes.
- Comply with all Foundation policies and requirements.

PHOTO & MEDIA RELEASE

I grant The Project Girl Foundation permission to use my name, likeness, photograph, video, written statements, success story, and program participation information for educational, promotional, fundraising, website, social media, marketing, and reporting purposes.

I understand that participation is voluntary and that I will not receive compensation for such use.

Please select one:

☐ I AUTHORIZE the use of my name, story, photographs, and media.

☐ I AUTHORIZE photographs and media but request that my full name not be used.

☐ I DO NOT AUTHORIZE the use of my photographs, story, or media.

RELEASE OF LIABILITY

I release and hold harmless The Project Girl Foundation, its officers, board members, volunteers, and representatives from claims arising from the authorized use of photographs, media, or information as described above.

Recipient Signature: _____

Date: _____

Parent/Guardian Signature (if under 18): _____

Date: _____