

Photo/Video & Testimony Release

This agreement constitutes permission for Arapahoe County and Arapahoe/Douglas Works! to use your photograph/video footage AND/OR written or spoken testimonial, as specified below, in official electronic or print media for public information without further consideration.

Please read closely and check all that apply:

Photo/Video
Yes, I hereby grant permission to Arapahoe County and Arapahoe/Douglas Works! to use my photograph or image on video footage, first name and non-confidential information in official electronic or print media without further consideration. I acknowledge Arapahoe County and Arapahoe/Douglas Works! right to use my image in part or its entirety. I also acknowledge that Arapahoe County and Arapahoe/Douglas Works! may choose not to use my photo, video footage at this time, but may do so at its own discretion at a later date. I understand I will not be reimbursed for the use of my image now or in the future, and that Arapahoe County and Arapahoe/Douglas Works! will not use my image for the purpose of financial gain.
☐ No, I do not grant permission to Arapahoe County and Arapahoe/Douglas Works! to use my photograph or image on video footage , first name and non-confidential information in official electronic or print media.
Spoken Testimony/Written Statement
Yes, I hereby grant permission to Arapahoe County and Arapahoe/Douglas Works! to use my spoken testimony or written statement , first name and non-confidential information in official electronic or print media without further consideration. I acknowledge Arapahoe County and Arapahoe/Douglas Works! right to use my testimony in part or its entirety. I also acknowledge that Arapahoe County and Arapahoe/Douglas Works! may choose not to use my testimony at this time, but may do so at its own discretion at a later date. I understand I will not be reimbursed for the use of my testimony now or in the future, and that Arapahoe County and Arapahoe/Douglas Works! will not use my testimony for the purpose of financial gain.
☐ No, I do not grant permission to Arapahoe County and Arapahoe/Douglas Works! to use my spoken testimony or written statement , first name and non-confidential information in official electronic or print media.
My signature below acknowledges that I understand the above stated information.
PRINTED NAME:
SIGNATURE:
DATE:
ADDRESS & CITY:
PHONE:
EMAIL.

Arapahoe/Douglas Works! is an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities.