

## Photo, Video, and Life Story Release Consent Form

I, \_\_\_\_\_\_\_\_, hereby give permission for photographs, videos, and life account of myself and of minors in my care to be used by Office for Refugees, Archdiocese of Toronto (ORAT), the Archdiocese of Toronto, ShareLife and/or any Constituent Group working with ORAT to be used as part of any of their information materials and publications. By signing this document, I agree to waive any rights to compensation or ownership thereof. I also understand that this information may be shared within a parish community (e.g., parishioners, parish organizations and volunteers) or to the broader community in order to assist with fundraising efforts in support of the resettlement of refugees.

Newcomer Name (please print):	
Witness Name (please print):	
<u>Signatures:</u>	
Newcomer:	Date:
Witness:	Date: