

Reserve #77A Box 1579, Rm 120- 740 Sioux Avenue Fort Qu'Appelle, SK SOG 1S0 P: 306.332.2626 F: 306.332.2679

MEDIA RELEASE – ADULT

I, (name)	hereby consent and authorize an employee or
agent of Treaty Education Alliance (TEA	a) to take photographs or motion pictures of myself;
or to produce videotapes, audiotapes,	closed circuit television programs, web casts, or other
types of media productions that captur	e my name, voice, and/or image (any of the foregoing
types of media are called the "Material	s" in this Consent and Release form).
*If you wish to be notified before "Mate	erials" are posted to a public forum, initial here,
display, exhibit, reproduce, license to a educational or promotional materials o limited to program publications, catalog	als, and I authorize TEA to use, reuse, copy, publish, third party, and distribute the Materials in any or other forms of media, which may include, but are not gs, articles, magazines, recruiting brochures, websites or offer the Materials for use or distribution in other without notifying me.
I also agree that TEA may identify myse etc., please have them cross through th	elf by name. (If you do not wish to be identified by name is sentence, and initial here.)
I agree that I am participating on a volu TEA for signing this release or as a resu	Intary basis, and I will not receive any payment from It of any publication of the Materials.
I understand the terms and provisions a by the terms and provisions as contained	as contained in this Agreement and agree to be bound ed herein.
Printed Name of Participant	School / First Nation
Signature of Participant	Witness
Date	