



2024-2025 Illinois AmeriCorps Media Consent Form

Name of Media Subject

Age

Address

Phone Number

I, the undersigned, authorize _____, its officers, agents, and employees or other authorized representatives to use my image in magazines, newspapers, periodicals, radio, television, educational media, and other news to use and publish (including publication on the World Wide Web) such information and/or photographs or videotape together with such identification as may be reasonable for the purpose of publicity or communications.

I authorize Serve Illinois, its officers, agents, and employees or other authorized representatives of magazines, newspapers, periodicals, radio, television, educational media, and other news to use and publish (including publication on the World Wide Web) such information and/or photographs or videotape together with such identification as may be reasonable for the purpose of publicity or communications.

I do not consent to being featured in media.

Signature of Media Subject (if under 18, a parent/guardian signature is required)

Printed Name of Media Subject

Date

****REQUIRED TO BE COMPLETED BY ALL MEMBERS****