

CONSENT TO PHOTOS AND/OR VIDEO RECORDING

**The purpose and intended use of the videos or photographs is as follows:**

To provide training and outreach materials to child support staff, attorneys and legal staff, collections workers and others working in the support area throughout the state of Minnesota. The primary access of the materials will be on the Minnesota Family Support and Recovery Council Website ([www.mfsrc.org](http://www.mfsrc.org/)).

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\_ I do not authorize Minnesota Family Support and Recovery Council to take, use, publish, reproduce, and/or distribute photographs, videos, or similar recordings of my image.

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\_ \_ I authorize Minnesota Family Support and Recovery Council to take, use, publish, reproduce, and/or

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distribute photographs, videos, or similar recordings of my image. I waive any right to inspect or approve any proposed publication, reproduction, or distribution, in any medium. I understand that Minnesota Family Support and Recovery Council does not control third party use of the photographs, video recordings, or similar recordings after they are published or distributed. I understand that allowing Minnesota Family Support and Recovery Council to take, use, publish, reproduce, and/or distribute the photographs, video recordings, or similar recordings is completely voluntary and that I am under no obligation to provide this consent. I understand I will not be paid for Minnesota Family Support and Recovery Council’s use of these photographs, video recordings, or similar recordings. I understand that I am authorizing the release of information that may be classified as private data under the Minnesota Government Data Practices Act, Minn. Stat. Ch. 13.

By signing this Release and Consent, I release Minnesota Family Support and Recovery Council and its officers, employees, and agents from any liability from the taking, use, publication, reproduction, or distribution of the photographs, video recording, or similar recordings.

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I understand that I may revoke this consent by sending a written notice of revocation to the Minnesota Family Support and Recovery Council President at the address listed on [www.mfsrc.org;](http://www.mfsrc.org/) However, I understand that the revocation will not apply to Minnesota Family Support and Recovery Council’s prior use of the photographs, video recordings, or similar recordings, taken in reliance on this Release and Consent.

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By signing this Release and Consent, I certify that I have read and understand the contents of this document and have the right and authority to execute this Release and Consent.

Signature Session Title

Print Name (s) Session Date

Title/Position Session Time