



LADIES OF CHARITY
OF THE UNITED STATES OF AMERICA®
Providing Vincentian Leadership to Women Acting Together Against All Forms of Poverty

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**Consent for Use of Image and Voice Recordings in
Promotional and Informational Materials**

Date of Event _____

Description of Event _____

Person being photographed, videotaped or recorded:

Name _____

Address _____

City/ST/Zip _____

Email or phone (optional) _____

I, the undersigned, authorize photographs, vocal recordings, and similar image and vocal representations to be made of me/my child/person for whom I am guardian by an authorized representative of Ladies of Charity U.S.A. (LCUSA). I understand these may be used as photographs, videos, or other mediums in displays, professional journals, or other LCUSA publications, illustrations, and electronic media for both internal and external use. I waive all rights that I may have to claims for payment of royalties or other compensation in connection with use of these images and/or recordings.

I agree to let LCUSA post images of the individual listed above on Facebook, LinkedIn, and other electronic mediums for the purpose of promoting or informing the public about LCUSA. This gives permission to LCUSA to 'tag' photos of the individual listed above that will be able to be viewed on my Facebook page as well. I understand that images posted on social media websites may be accessible to others who are not necessarily affiliated with myself or LCUSA. I also agree to let LCUSA post approved text about the individual listed above -- for use on the LCUSA website and other electronic forms of communication affiliated with LCUSA.

Your Signature _____

Consent for minors and persons with guardian is mandatory. Please fill out the information and sign below.

Parent/Guardian _____

Address _____

City/ST/Zip _____

Email or phone (optional) _____

Title/Relationship to person listed above _____

Parent/Guardian Signature _____

Name of LOC Representative/Witness _____