

Release Form for Adults



I, being of legal age, hereby grant United Way of Central Florida (UWCF), its assigns or successors, permission to use my story and/or likeness, in whatever they desire. Furthermore, I consent that such story and/or likeness, shall be the property of UWCF, and they shall have the right to duplicate, reproduce and make other uses of such story and/or likeness as may be necessary, free and clear of any claim whatever on my part.

Name (*Print*): _____

Signature: _____

Company: _____

Company Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Birthdate: ____ / ____ / ____

Release Form for Minors



I, being the parent/guardian of _____, hereby grant United Way of Central Florida (UWCF), its assigns or successors, permission to use the story and/or likeness in which he/she appears in whatever they desire. Furthermore, I consent that such story and/or likeness, shall be the property of UWCF, and they shall have the right to duplicate, reproduce and make other uses of such story and/or likeness as may be necessary, free and clear of any claim whatever on my part.

Name of Minor: _____ Birthdate: ____ / ____ / ____

Parent Name (please print): _____

Parent Signature: _____

Address: _____

City: _____ State: _____ Zip: _____