



Media Consent Guidelines

We thank you for the opportunity to share your experiences (your “story”) with others who are interested in learning about Kessler Foundation and supporting our activities. Sharing your story and/or your image (photographs/video) is your decision. Doing so—or choosing not to—will have no impact on your participation in Kessler Foundation research or related programs. We strive to represent your story and image in a way that you feel is appropriate and true to your experiences.

Why are we asking for your story?

- To educate our audiences and increase their understanding of Kessler Foundation’s work
- To inspire others to support our work by donating, volunteering, or advocating for our mission

How will we use your story?

- We may or may not share every detail you provide.
- We may add context, such as more details about the research and your condition.
- We may share your story, your image, or parts of your story in digital and print publications, including videos, emails, letters, brochures, newsletters, magazines, social media, and websites for fundraising and/or publicity.

What can you expect?

- You will have the opportunity to approve and update your story before it is published.
- You can change your mind at any time and remove your consent. When you inform us, we will not use your story in future communications. However, we may not be able to withdraw images and stories already published.
- You may ask questions related to this consent at any time, and they will be answered promptly.

If you wish for your story or image to stop being used, or if you have any questions or comments about how your story is being used, please email us at Media@KesslerFoundation.org.

Please submit completed media consent forms to Media@KesslerFoundation.org.



Media Consent Form

I, _____, hereby grant permission to Kessler Foundation to capture my story and/or image (photographs/video) for use in digital and print publications, including videos, emails, brochures, newsletters, magazines, social media, and websites for fundraising and/or publicity.

Privacy

I request the following conditions about the use of my story, image, and name:

- Use a pseudonym to protect my identity
- Obscure my likeness so as not to reveal my identity
- Other conditions or considerations (describe below):

Please **initial** the paragraph below that describes your current situation and sign accordingly:

I am 18 years of age or older, and I am able to make legal decisions on my own. I have read the Media Consent Guidelines and Media Consent Form. I fully understand what is being requested of me and how my story and image will be used. I give permission for Kessler Foundation to use my story and image as described above.

Signature: _____ Date: _____

Name (please print): _____

Address: _____

Email address: _____

I am the parent or legal guardian of the below-named individual. I have read the Media Consent Guidelines and Media Consent Form. I fully understand what is being requested of this individual and how their story and image will be used. I give permission for Kessler Foundation to use their story and image as described above.

Signature of parent or legal guardian: _____ Date: _____

Name of parent or legal guardian (please print): _____

Name of media subject for whom consent is granted: _____

Address: _____

Email address: _____