



## HUI MĀLAMA O KE KAI FOUNDATION

### Media Consent Form (Optional and Confidential)

I/We hereby consent to allow the Hui Mālama O Ke Kai Foundation to take pictures of my/our child and other members of our family during Hui Mālama O Ke Kai Program activities for the purpose of program documentations, community education and/or public relations.

I/We hereby consent to allow the Hui Mālama O Ke Kai Foundation to make a video or audio recordings of my/our child and other members of our family during Hui Mālama O Ke Kai Program related activities for the purposes of program documentations, community education and/or public relations.

These photographs, videos, or audio recordings may be used in newsletters, newspaper articles, presentations, calendars or posters, program materials and documentations, and/or for other similar uses.

I understand with full knowledge that these photographs, videos, and/or audio recordings are the property of the Hui Mālama O Ke Kai Foundation.

*List all family members that may be covered by this consent form.*

*Parent: Please sign the very bottom for all minors noted on this consent form.*

<b>Participant's Name:</b>	<b>Participant's Signature</b> <i>*If 18 years old &amp; over.</i>
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<b>Parent's Signature:</b>	<b>Date:</b>

*\*This consent may be withdrawn at anytime by contacting the Program Manager at 259-2031.*