

OEATA
(ONTARIO EXPRESSIVE ARTS THERAPY ASSOCIATION)

Consent and Release Form

I hereby grant permission to the Ontario Expressive Arts Therapy Association to use my
(describe) _____

for the website, educational, promotional, news, editorial, advertising materials in print and for
electronic/online formats.

I understand the _____ may appear in a variety of formats
and media now available to the Association and that may be available in the future. I acknowledge the
Association's unrestricted rights to use and re-use my photograph in whole or in part and without
restriction to changes or alterations. I hereby waive any right that I may have to inspect and approve the
finished product or copy that may be used in connection with the

I authorize the use of these images without compensation to me.

I have read the above release and I am fully familiar with its contents. I further certify that I am either of
legal age, or possess full capacity to execute the forgoing authorization and release.

Name (please print) _____

Signature _____ Date _____

Consent for Minor Under 18

I am the parent or guardian of the minor named above and has the legal authority to execute the above
release. I approve the foregoing and waive any rights in the premises.

Name (please print) _____

Signature _____ Date _____