

Re•Vision Centre Digital Storytelling Workshop: Participant Release Form

I, the undersigned _____ (please print your name), grant *The Re•Vision Centre for Art and Social Justice* permission to use all or part of my final digital storytelling project for the following educational and outreach purposes. **(Please write your initials next to each option that you agree to).**

I understand that by initialing and signing this form, I voluntarily and knowingly agree and consent to screening my digital story, distributing my written script, or displaying images from the story in the following ways:

_____ At future digital storytelling workshops taught by *Re•Vision* as an example of script work/design approach. Note any comments or exceptions here:

_____ At community screenings of *Re•Vision* intended to raise awareness about specific social issues and/or to get people involved in digital storytelling. Note any comments or exceptions here:

_____ At public health, social justice and academic conferences to generate support for the work of *Re•Vision*. Note any comments or exceptions here:

_____ In human rights, women's, and other special interest film festivals to offer visibility to the work of *Re•Vision*. Note any exceptions here:

_____ On the *Re•Vision* website. Note any exceptions here:

_____ For research grant applications to be screened by grant committee only. Password protected. Note any exceptions here:

Signature

Date

Mailing Address (Street, City, Province, Postal Code, Country)

Phone

Email