



Christian Family Care General Consent Form

I, _____ grant permission to Christian Family Care (CFC) and any of the Programs affiliated with the agency to use:

(Check All That Apply)

☐- Story ☐- Comments ☐- photograph ☐- video ☐- other: _____ for use in media publications including:
☐- Email Blasts ☐- Social Media ☐- Websites ☐- Newsletters ☐- Magazines ☐- General Publications
☐- Advertisement ☐- Promotional Materials ☐- Recruiting Brochures ☐- Videos ☐- Other: _____

- ☐- The material selected may be used with names being changed.
- ☐- The material selected may be used without names being changed.
- ☐- The material selected may not be released to general-public.
- ☐- The material selected may be released to Board members only.

I _____ authorize Christian Family Care (CFC) to use and/or share the material checked above regarding me and/or my child/children in all forms of media for awareness, advertisement, and any other lawful purposes. I won't receive payment and will have no right to view or approve them before or after they have been used.

Please initial the paragraph below which applies to your present situation:

☐- I am 21 years of age or older, and I am competent to contract in my name. I have read this release before signing below, and I fully understand the contents, meaning, and impact of this release. I am free to address any specific questions prior to signing, and failure to do so will be interpreted as a free and knowledgeable acceptance of the terms of this release.

☐- I am the parent or legal guardian of the below-named child. I have read this release before signing below, and I fully understand the contents, meaning, and impact of this release. I am free to address any specific questions prior to signing, and failure to do so will be interpreted as a free and knowledgeable acceptance of the terms of this release.

Name (please print): _____

Child/children name(s) (please print): _____

Signature of parent/legal guardian: _____ (if under 20 years of age)

Signature: _____ Date: _____

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