



CONSENT FOR MEDIA RELEASE / RELEASE OF PUBLIC INFORMATION

I _____ do hereby agree to the release of

- Visual,
- Written
- Auditory
- Other (describe) _____

material concerning myself to MENTAL HEALTH ASSOCIATION, INC.

This material will be used in MHA's:

- Informational brochure (i.e. 1200 brochures to be distributed over next two years)
- Newsletter (i.e. 500 newsletters to be distributed over next year)
- Annual report (i.e. 500 reports to be distributed over next year)
- Website
- Social media (Facebook, twitter, google +)
- Other _____

Comments: _____

It is likely to be seen/heard by MHA Board of Directors, Staff, Participants, Families/Guardians, Funders, Community Entities and/or General Public.

I give consent voluntarily, with no negative implications or promise of special reward. I have been given an opportunity to fully discuss the release and to have my questions answered. I understand that I may take time to reach a decision. I also understand that I may withdraw consent at any time prior to release, with no negative implications. This form is limited by "each occasion of release".

_____ Date _____ Signature

_____ Date _____ Signature of Legal Guardian, if any

I have fully explained the information above and have answered all questions to the best of my ability. It is my opinion that consent has been given knowingly and freely.

_____ Date _____ Signature of person obtaining consent

_____ Title / Position

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