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Easter Seals AccessAbility (Equipment & Tech) Program Funding Application Form 2025

**** To be completed by parent/caregiver ****

Consent to Use of Photograph/Video

I, _____ (your name), give permission to Easter Seals Canada and its representatives to use the photograph/video of me and/or my child(ren) _____ (the name of your child(ren)) and use the photograph(s)/video(s) in all forms of media, for any and all promotional and communication purposes including advertising, display, audiovisual, exhibition or editorial use.

I also give permission to Easter Seals Canada and its representatives to use my name and/or my child(ren)'s first/given name(s) in connection with the photograph(s)/video(s), if needed and appropriate.

I understand and agree that I and my child(ren) will not receive any payment for my time or expenses, or any royalty/compensation for the use of the photograph(s)/video(s) or our names. I also hereby release Easter Seals Canada and its representatives from any such claims in the future.

I confirm that I have read and fully understand this consent and release, and that all questions that I have about this consent have been answered to my satisfaction.

Signature of Subject/Parent/Guardian

Signature of Witness

Print Name

Print Name

Date

Date