Consent for Success Story and Photo Release

By signing this form, you allow us to use your success story and/or your picture. We may use the information in the NewView Oklahoma newsletter, annual report, a local newspaper story, or brochures that publicize the services through OK ABLE Tech, the assistive technology program of Oklahoma.

I give my permission for NewView Oklahoma, through Oklahoma ABLE Tech employees and participants of ABLE Tech programs, to photograph me and my property and in turn give the photograph and related assistive technology information to NewView Oklahoma of Oklahoma City. I understand the information/photograph may be copyrighted, published and/or reproduced thereof, in color or otherwise, made through any media at Oklahoma State University studios or elsewhere. I agree that all rights to the picture belong to ABLE Tech and waive the right to inspect and/or approve the finished product that may be used in connection therewith, or the use to which it may be applied.

Date: X_________________________

Name: ___________________________________

Address: ___________________________________

City: ___________________________________

Signature: X______________________________

☐ Check this box if you would not like your name identified in association with the picture and related information.