



Occasionally, we take photos during the course of an event to capture graphically a picture of public health at work. It is possible, at some point in time, we may wish to use photos taken during this event to develop materials to promote public health. Please indicate your willingness to have your image used in this manner.

I grant permission to PPHD to use my image for promotion of public health.

I do not wish PPHD to use my image for promotion of public health.

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Name

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Date