



# Connecticut State Grange

P. O. Box 1393, Glastonbury, CT 06033 • (860) 633-7550 • www.CTStateGrange.org

## **Contact Information Liability Waiver/Release Form** **for Officers / Committees / Representatives**

As an Officer of the Connecticut State Grange, and/or a Committee Director, Committee Member or otherwise representative of the Connecticut State Grange, I do hereby consent and authorize The Connecticut State Grange and its authorized affiliated organizations to use my Name, Address, Phone Number, E-mail Address, and photograph(s) as information for the purpose of Grange contact within it's media entities where information is disseminated to the public.

Any personal information provided by me to The Connecticut State Grange, may be used for purpose of publication on The Connecticut State Grange website as well as in it's print and public relations media where information is disseminated to the public. The website containing my provided personal information may be used in perpetuity and published, in whole or in part, in any and all media.

I acknowledge that my name and personal information may be used in whole or in part and the information may be paraphrased, amplified, shortened and/or put into conversational form to meet the requirements of the Connecticut State Grange website, print, and other media where information is disseminated to the public.

I further release The Connecticut State Grange, its affiliates, members, employees and agents from any and all claims of damages for libel, slander, invasion of the rights of privacy, or any other claims based on, arising from, or connected with the use of said name and provided information.

I am over 18 years of age and have the right to make this release. This release shall be binding upon me and my heirs, legal representatives, and assigns.

**Please initial one of the following options:**

\_\_\_\_\_ Yes, I do authorize the Connecticut State Grange to use my name, personal contact information as provided below, and photograph in the manner detailed above.

\_\_\_\_\_ Yes, I do authorize the Connecticut State Grange to use my name and photograph, but I do NOT authorize the Connecticut State Grange to use my personal contact information in the manner detailed above.

\_\_\_\_\_ No, I do NOT authorize the Connecticut State Grange to use my name and/or my personal contact information, including my photograph, in the manner detailed above.

**Name of Office(s) and/or Committee(s) You Are Representing:**

Position: \_\_\_\_\_

Position: \_\_\_\_\_

Position: \_\_\_\_\_

Your Name: \_\_\_\_\_

Your Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Your Grange / Pomona: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_