



INTERNATIONAL SOCIETY FOR KEY WOMEN EDUCATORS
DELTA KAPPA GAMMA

BEAR PROJECT

MEDIA USAGE PERMISSION FORM

By signing below, I am granting permission to **Delta Kappa Gamma (DKG)** for **me/my child(ren)/ family** to be filmed, videotaped, audio taped, photographed, by any means, and am granting full use of name, likeness, voice, and words without compensation. I understand **my/my child(ren)/family's** name and image might be used on DKG websites/blogs (international, state, and/or local), in written and audio media such as local/state newspapers; DKG newsletters, publications, and presentations, on local radio spots, or used in other media.

Name(s) (Printed): _____

Signature (Or signature of

Parent/Guardian if under 18): _____

Date: _____

Please return this permission slip and refer any questions regarding it to the local DKG Chapter President or BEAR Project Committee Chair.