



## Texas Self-Directed Care

### AUTHORIZATION TO USE PARTICIPANT’S LIKENESS FOR PUBLIC RELATIONS AND FUNDRAISING PURPOSES

I understand that the Texas SDC Program is a short-term pilot program that will end in 18 months. I also understand that the TX SDC Program engages in public relations and fundraising programs to raise public awareness about self-directed care to sustain long-term funding.

I’ve been asked for permission to use photographs, audio, or similar “likenesses” of myself in the TX SDC Program’s public relations and fundraising programs. I have been assured that permission is not required as a condition to receive services from the TX SDC Program.

I wish to help the TX SDC Program in its public relations and fundraising programs. I consent to photographs, slides, television, videotape, audiotape, or motion pictures (called my “likeness”) being taken of \_\_\_\_\_ (your name), for public relations and fundraising purposes, subject to the following conditions:

- (1) My last name will not be used to identify my “likeness,” unless I initial here: \_\_\_\_\_
- (2) The “likeness” will be taken only with consent from me and the Director of the TX SDC Program.
- (3) The “likeness” will only be used in fundraising and public relations media for five years from the date I sign this consent.

I can revoke (take back) this authorization at any time by notifying the TX SDC Program Director. However, revoking this authorization will not affect any materials that were already distributed based on my previous authorization.

I also understand that my “likeness” may be distributed by other people (such as passing on their copies of a “likeness”) based on my current/previous authorization and that the TX SDC Program has no way to prevent this from happening.

I have been given an opportunity to ask questions about this authorization, and either I had no questions or they have been answered to my satisfaction.

I expect no payment or anything else valuable for signing this authorization. Also, this authorization as to any use of photographs, slides, television, videotape, audiotape, or motion pictures will expressly release from liability to me the person obtaining the “likeness,” and the TX SDC Program and its personnel.

\_\_\_\_\_  
Participant Name

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
Date