

Creative Works Consent Form

I hereby consent to the publication and republication of photographs, artwork, craft projects and creative writings done by a patient, family member, staff, volunteer, etc., as noted below:

Artist name (only one artist name per form): _____

I authorize Seattle Children's, its programs and affiliates ("Children's") to use such photographs, artwork, crafts, and/or creative writings (such as poetry, stories or letters) in any communications medium Children's, in its judgment, chooses. Such use may include editing, cropping, adaptation, excerpting or other modification, at Children's choice.

Any usage restrictions to be observed: _____

I can revoke this authorization by notifying Children's Marketing Communications Department by phone, in person or in writing. If I do revoke the authorization, it won't affect any actions that Children's has already taken based on this form. I understand that I don't have to sign this form for my child to get treatment from Children's.

Signature (Parent/Guardian if artist is under 18): _____

Printed Name: _____ Date: _____

Relationship to artist: _____

Street: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ E-mail: _____

For Children's Office Use:

Children's contact: _____

Description of person photographed / recorded: _____

Event / location / type of media: _____

Subject's Children's title / connection to Children's: _____

Usage of this content logged on reverse.

Marketing Communications
Seattle Children's
P.O. Box 5371 / S-217
Seattle, WA 98145-5005
Phone: 206-987-5246

# of Uses	Usage / Vehicle / Outlet	Media Type	Date of Use / Publication	Children's Project Owner
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