



Where Do I Belong? Community Art Project Participant

THE CR8TV HOUSE RELEASE AND WAIVER OF LIABILITY FORM - PLEASE READ CAREFULLY

Project Overview:

"Where Do I Belong?" is a collaborative community art project dedicated to preserving and celebrating the stories and memories of Black and Brown life in Milwaukee. By uniting artists and community members, this restorative healing initiative fosters authentic engagement, aiming to build bridges of connection, compassion, and empathy.

Participant Information:

NAME:	ADDRESS:
PHONE NUMBER:	*EMAIL:

*Providing your email address is optional. It will be used by THE CR8TV HOUSE INC. and their event sponsors to keep you updated on upcoming events and items that may be of interest to you.

Consent to Participate:

By signing this form, you agree to participate in the "Where Do I Belong?" Community Art Project. Your participation will involve sharing personal stories, memories, and experiences about your life in Milwaukee through interviews, photos, and other mediums. These contributions may be used in artworks, publications, zines, exhibitions, and other project-related materials.

Consent to Use of Contributions:

I, the undersigned, grant permission for the "Where Do I Belong?" project team to use my contributions, including interviews, photographs, likeness, and any other materials I provide, in the following ways:

1. Artworks: Contributions may be transformed into various forms of artwork by collaborating artists.
2. Publications and Zines: Contributions may be included in publications, zines, and other printed materials related to the project.
3. Exhibitions and Events: Contributions may be displayed in exhibitions, events, and other public presentations related to the project.
4. Digital Platforms: Contributions may be shared on digital platforms, including websites, social media, and online galleries.

Consent to Use of Likeness: I hereby grant permission for the "Where Do I Belong?" project team to use my likeness, including photographs and video recordings, in perpetuity, for any of the purposes outlined above. This includes the use of my likeness in future artworks, publications, exhibitions, and digital platforms without any limitation on the time period or geographic location.

Photographic Release: I grant permission to the "Where Do I Belong?" project team and their designees to take photographs and videos of me in connection with this project. I authorize the use of these images for any lawful purpose, including but not limited to promotional materials, websites, and exhibitions, without any further compensation or approval required.

Confidentiality: All personal information provided will be kept confidential and will only be used for the purposes of this project. Identifiable information will not be shared without your explicit consent.

Non-Disclosure Agreement: I agree not to disclose any information regarding the project, including personal stories, photographs, videos, and other materials, until the project's public release. This includes refraining from sharing such information on social media, with friends or family, or with any media outlets.

Right to Withdraw: Participation in this project is voluntary. You have the right to withdraw your consent and participation at any time without any negative consequences. To withdraw, please contact Symphony Swan at 414- 502-8142 or INFO@THECR8TVHOUSE.ORG.

Explicit Consent: Please indicate your consent by checking the boxes below:

- | | |
|---|--|
| <input type="checkbox"/> I consent to participate in the "Where Do I Belong?" Community Art Project. | <input type="checkbox"/> I consent to the use of my contributions as outlined above. |
| <input type="checkbox"/> I consent to the use of my likeness in perpetuity for the purposes outlined above. | <input type="checkbox"/> I consent to the photographic release as outlined above. |
| <input type="checkbox"/> I agree to the non-disclosure agreement until the project's public release. | |

Assumption of Risk: I acknowledge that participation in the "Where Do I Belong?" Community Art Project may involve certain risks, including but not limited to emotional distress, physical injury, or loss of personal property. I voluntarily assume all such risks, whether foreseen or unforeseen, and agree to hold harmless the "Where Do I Belong?" project team, its members, volunteers, and affiliates from any and all claims arising from my participation.

Acknowledgement: I acknowledge that I have read and understood the information provided above. I voluntarily agree to participate in the "Where Do I Belong?" Community Art Project and consent to the use of my contributions and likeness as outlined.

Printed Name:	Signature:	Date:
---------------	------------	-------

Contact Information: For any questions or concerns about this project, please contact Symphony Swan- Zawadi at Phone Number: 414-502-8142 Email Address: INFO@THECR8TVHOUSE.ORG

IF PARTICIPANT IS UNDER 18, THE PARENT (OR GUARDIAN, IF ANY) MUST SIGN.

I am the parent or legal guardian of the above participant and he/she has my permission to participate in the Project facilitated by THE CR8TV HOUSE INC. I have read and agreed to the provisions stated above for myself and the participant. I understand the nature of the project and the potential risks involved.

Print Adult's Name:	Signature	Date
Children's Name under 18		Emergency Contact Name and Phone Number

Thank you for your participation and contribution to this meaningful project!

EMAIL: INFO@THECR8TVHOUSE.ORG | PHONE: 414- 502-8142