

REPARATION GENERATION™

Media and Name Release Form

Full Legal First Name _____

Full Legal Last Name _____

Chosen or Shortened Name (if any) _____

I hereby authorize Reparation Generation, a project of Multiplier, together with their respective agents and assignees, to use in perpetuity my likeness and photograph, video, and voice (“Recordings”) of me and/or my name, as authorized below, in connection with the **Truth-Telling** Stories to further their mission of providing reparative transfers to Black Americans for wealth-building pursuits. To achieve this, we must first reconcile with our past, explore our interactions with a government and society built upon Black oppression, and bring long-overdue economic repair to Black Americans. A national, government-funded reparations program is the ultimate goal.

Check ALL that you authorize us to use:

Full First Name

Full Last Name

Chosen/Shortened Name

Recordings with authorized name(s) Recordings without authorized name(s) Authorized name(s) only

I understand that the Recordings and/or images of me and/or my name(s) may be used in a wide variety of promotional materials including newsletters, flyers, posters, brochures, advertisements, fundraising letters, annual reports, press kits and submissions to journalists, websites, social networking sites and other print and digital communications in media now known or ever developed to further the project’s mission. I understand these materials will not be used for sharing data with third parties or advertisers. I further understand and agree that Reparation Generation will not compensate me for the use of the Recordings and/or name(s) and I waive any right to inspect or approve the Recordings or use of the Recordings. I release and discharge the Reparation Generation, a project of Multiplier, together with their respective agents and assignees from any and all claims and demands that may arise out of or in connection with the use of the photographs, including without limitation any and all claims for libel or violation of any right of publicity or privacy. I am a legally competent adult and have the right to enter this contract. I have read this document and fully understand its contents. This release shall be binding upon me and my heirs, legal representatives, and assigns.

Date (Month/Day/Year): _____

Signature: _____

Contact Information

Note: We will use your telephone, email and mailing addresses only to contact you regarding use of the recordings and your name(s). You will not be added to any lists unless you specifically subscribe to them.

Telephone: _____

E-Mail Address: _____

Street Address: _____

City, State, Zip: _____