



OCCH
OHIO CAPITAL
CORPORATION
FOR HOUSING



OCIC
OHIO CAPITAL
IMPACT
CORPORATION

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PHOTOGRAPHY WAIVER FOR AN ADULT:

I, _____ authorize Ohio Capital Corporation for Housing and/or Ohio Capital Impact Corporation to use and reproduce any photographs, audio and/or video recording of my participation for any and all purposes while attending/participating in activities funded through the Carol Mount Peterson Resident Development Fund.

Name of Participant:

Signature:

Date:



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OCIC is a 501(c)(3) non-profit organization.

PHOTOGRAPHY WAIVER FOR CHILDREN UNDER THE AGE OF 18:

I, _____ authorize Ohio Capital Corporation for Housing and/or Ohio Capital Impact Corporation to use and reproduce any photographs, audio and/or video recording of my child's participation for any and all purposes while attending programs and activities funded through the Carol Mount Peterson Resident Development Fund.

Name of Participant:

**Signature of
Parent of
Guardian:**

Date:
