

## Photo Publication Release Form

Title of Research: PHACE Photovoice Project  
IRB No.: 20-X-43

*All persons taking photographs for the purposes of Ohio University research must obtain a signed release form from anyone who is visibly recognizable in the photograph. Crowd scenes where no single person is the dominant feature are exempt. This form is intended for use with Ohio University IRB approved research under the above noted IRB protocol.*

### PARTICIPANT CONSENT

I am 18 years of age or older and hereby grant the researcher designated below from the Ohio University permission to use my likeness in photograph(s) for publication or art installations for the above titled IRB approved research only. My name will not be used in any publication. I will make no monetary or other claim against Ohio University for the use of the photograph(s).

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

**If Participant is under 18 years old, consent must be provided by the parent or legal guardian:**

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

**If you have questions, please contact the Ohio University Researcher:**

Anna M. Kerr, PhD  
Ohio University, Heritage College of Osteopathic Medicine

346 Grosvenor Hall  
1 Ohio University  
Athens, Ohio 45701  
[kerral@ohio.edu](mailto:kerral@ohio.edu)  
(740) 593-2508