

Art: A Voice Art Show Informed Consent**

In seeking consent for the display of your artwork, the agencies and organizations involved in the planning of this year's art show are providing you with information addressing the reasons for the art exhibit and its intended use.

Permission to Exhibit Artwork

I hereby give permission that art produced by _____ may be used for the following purposes: (Artist's full name)

- Exhibition/Display within the general community for the Art: A Voice art show
- Internet/Website photographs of the event

Confidentiality (Please check your preference below):

- I would like my/my child's name to be listed as the identified artist.

I understand that my/my child's name will be used as the identified artist. I understand that the exhibit will be advertised and associated with persons who use art to manage, cope with or express their mental health challenges. I understand that my/my child's artwork will be handled with care and returned to me after the exhibit, but that the organizations and volunteers involved are not responsible for lost, stolen or damaged artwork.

- I would not like my/my child's name to be listed as the identified artist.

I understand that no reference will be made to my/my child's identity and that confidentiality will be maintained. I understand that the exhibit will be advertised and associated with persons who use art to manage, cope with or express their mental health challenges. I understand that my/my child's artwork will be handled with care and returned to me after the exhibit, but that the organizers and volunteers involved are not responsible for lost, stolen or damaged artwork.

Revocation

I understand that I may revoke this authorization at any time by notifying Laura Tuomisto at 540-255-2458 or at laura@shenarttherapy.com. I acknowledge that any photographs, use or disclosure made prior to notice will not be affected by my revocation.

Signature of Artist

Date

Signature of Legal Guardian (if applicable)

Date

**Turn in with art submission or send to Laura Tuomisto via email (laura@shenarttherapy.com) or via mail (1600 N. Coalter St., Suite 8, Staunton, VA 24401)