Media Agreement Worksheet

Unit: Date: Chaplain:

Requestor's Information:

Volunteer Organization/Ministry Name: Responsible Party: Position Title:

Date	Start Time	End Time	Location

Please state the media method (pictures, videos, or interview) and explain how the ministry will utilize the media obtained (internet, social media, publication)?

Print Name	Signature	Date
Chaplain	Chaplain	
Warden	Warden	

Approve	ed / Denied
Date:	
Initials:	