

# Public Awareness Committee Updates



**Upcoming Survey**

**Authorization and Release Form**



**WIBOSCO Facebook**

# Public Awareness Committee Updates



**Short upcoming  
survey about Public  
Awareness Needs of  
the Membership**

**WIBOSCO Public Awareness Survey**

 echojanesville69@gmail.com (not shared) [Switch account](#) 

Email and Google account are not part of your response

On a scale of 1-5 (1 being not confident at all to 5 being very confident) how confident are you regarding your knowledge of the WIBOSCO? \*

1      2      3      4      5

On a scale of 1-5, how user friendly do you think the WIBOSCO website is? \*

1      2      3      4      5

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## Authorization and Release Form



Share your story with us!

### Authorization & Release

The Wisconsin Balance of State Continuum of Care (WIBOSCO) is the membership organization for agencies who provide homeless services in the State of Wisconsin. The Wisconsin Balance of State is comprised of local coalitions of housing providers throughout 69 counties in the state of Wisconsin. WIBOSCO and **(enter agency name)** welcomes the opportunity to serve you. When you share how our service impacted your life, you help us secure the resources we need to serve others. We ask permission to use your story or picture in our publications including but not limited to newsletters, reports, social media, and our website. Thank you for helping us motivate others through your success!

We will not share your information except as specifically authorized by you.

Print Name \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

How did **(enter agency name)** make a difference in your life?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby give WIBOSCO and **(enter agency name)** permission to **(check all that apply)**:

- Use photographs of me (that they took or that I shared) in their publications or presentations.
- Use of my story (that I have shared) in publications or presentations.
- Share my contact information with news media for a potential interview.
- Send me newsletters and upcoming event notifications via email.

Select only one of the following:

- OK to Use My Full Name: Use my name in publications or presentations along with quotes or photos.
- Use My First Name Only: I am happy to share, but I do not want my last name used in conjunction with my story or photo.
- No Use of My Name: I am happy to share, but I do not want my name used in conjunction with my story or photo. I understand a fictitious name may be used with my story or photo.
- Declined all media and photo release opportunities.

### Authorization and Release

I hereby authorize WIBOSCO and **(enter agency name)** to copy, exhibit, publish or distribute my testimonial for purposes of publicizing or promoting WIBOSCO and **(agency name)** programs as defined on this form. These statements may be used in printed publications, multimedia presentations, social media, on websites or in any other distribution media. I agree that I will make no monetary or other claim against WIBOSCO and **(enter agency name)** for the use of the statement.

In addition, I waive any right to inspect or approve the finished product, including written copy, wherein my likeness or my testimonial appears.

I hereby hold harmless and release WIBOSCO and **(enter agency name)** from all claims, demands and causes of action which I, my heirs, representatives, executors, administrators or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

I understand that I may terminate this release at any time by providing the request in writing to the agencies involved. I have read the authorization and release information and give my consent for the use as indicated above. I understand my electronic signature is acceptable and considered valid for this agreement.

\_\_\_\_\_  
Signature

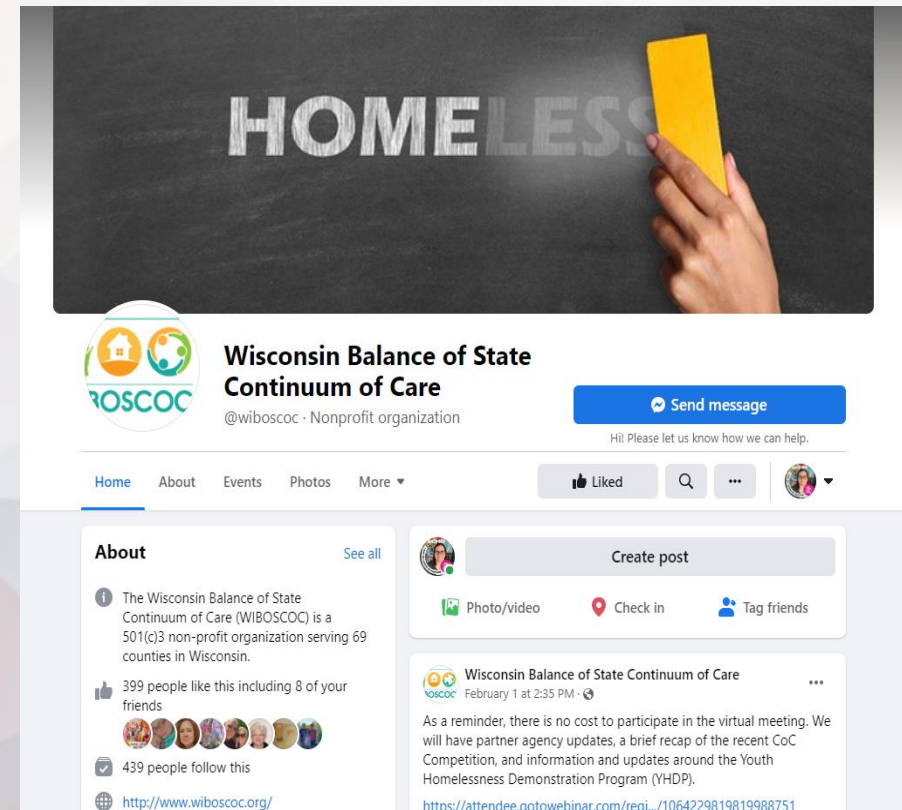
\_\_\_\_\_  
Date

# Public Awareness Committee Updates



**Please send job openings,  
news stories & more for  
upcoming content on the  
WIBOSCO FB Page**

**Facebook Contact  
Information  
Jessica Locher  
jlocher@echojanesville.org**



# Public Awareness Committee Updates



**If you would like to join the  
Public Awareness Committee, please contact**

**Michael Etheridge  
metherridge@thehavenofmanitowoc.org**

**Jessica Locher  
jlocher@echojanesville.org**