



I, _____ am speaking on behalf of the Multi-Service Eating Disorders Association (MEDA) on _____, 2018 at _____.

Name: _____

Email Address: _____

Phone: _____

Please note that MEDA will not photograph or record your speaking engagement without your permission.

I, _____ give MEDA permission to
_____ Photograph _____ Video

Given that this is a public event, there is a possibility that your speaking engagement could be photographed or recorded by a member of the public. MEDA will do everything that we can to mitigate that possibility.

It's important that you and a MEDA staff have reviewed what you plan to say in depth and that you feel comfortable speaking on behalf of yourself and MEDA.

Sharing personal experiences can be incredibly powerful, and public speaking can be very emotional. For those reasons we ask that you stay as close to the approved narrative that you have reviewed with a MEDA staff. We are here to support you if you have questions or need to check in before or after you speak.

We are so grateful for your willingness to share your experiences with the MEDA community. Please sign below indicating you have read and agree to the above statements.

X _____ Date: _____
Speaker