

## 2018 Statement of Individual Commitment

I, \_\_\_\_\_, as a member of the Linn and/or Johnson County communities am committed to be an active and contributing member of the Sexual Health Alliance of Linn & Johnson Counties. As individual; I am committed to the vision, goals, objectives and strategies that have been decided by The Alliance.

As general evidence of my commitment, I agree to do the following:

Represent my community at Alliance meetings and events.

Read minutes, reports and newsletters to keep abreast of decisions and/or activities.

Disseminate relevant information to relevant community contacts through listservs, websites and newsletters.

Actively participate in the planning and execution of all Alliance activities.

Name of Individual: \_\_\_\_\_

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

Date: \_\_\_\_\_

I hereby give permission to the Sexual Health Alliance to use any photographic images that result from participation in coalition activities (meetings, outreach events, etc.) in any form of marketing or promotion, including the website, Facebook page, and any future social media sites that the coalition may create and operate.

- Yes, I give my permission
- No, do not use my image