# **Application**



#### **Date of Application**

Vision - Improving lives by empowering individuals and communiti
The Manna Foundation is a 501(c)(3) nonprofit organization
The Harrist Towns and the a John Son of the organization

#### **Personal Information**

Full Name of Applicant				
Address				
Phone	Email	DoB		
Full Name of Applicant Spouse/Partner (if applicable)				
Address (if different than applicant)				
Phone	Email	DoB		
Names & DoB for children or any other adults living in the Applicants Place of Residence				

# **Summary of Need**

(please provide any photos or other supporting documents you have regarding the need)

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#### Monthly Income\*

(Please provide any one of the following documents as Proof of Income for Applicant, Spouse and any other adult living in residence)

- 1. Most recent tax return
- 2. Most recent w-2 form and 1099 forms
- 3. Two (2) most recent pay stubs
- 4. Written income verification from an employer if paid in cash
- 5. Proof of non-filing (IRS Form 4506)

\*Income information must be provided in order to process your application

CERTIFICATION: I certify that the information provided in this application is true and correct to the best of my knowledge. I understand that the information provided may be verified by The Manna Foundation, and I authorize them to contact third parties to verify the accuracy of the information provided on the application. I understand that if I knowingly provide untrue information in this application, I will be ineligible for assistance from The Manna Foundation and any financial may be reversed, and I will be financially responsible for assistance provided. May face civil/criminal consequences for intentionally misleading The Manna Foundation.

Signature Date

# Voluntary Media Release & Waiver I. Introduction

This Media Release ("Release") is executed by you in favor of The Manna Foundation ("Organization"), a nonprofit corporation dedicated to cultivating a world where individuals of all ages and their communities are empowered with knowledge, skills, and resources to sustain themselves and leave a lasting impact on the world around them. Through education, humanitarian programs, collaborative partnerships, and community engagement, we strive to empower individuals to overcome challenges, unlock their potential, and discover new opportunities. The purpose of this Release is to authorize the Organization to use collected or created media of you, such as photos, videos, voice recordings, written or spoken statements, etc. for promotional and marketing purposes, in connection with the application for benefits from the Organization. Execution of this Release is voluntary and agreed upon freely by you, ensuring that the

Organization can effectively promote its mission and activities through various media channels.

#### II. Grant of Rights

By executing this Release, you hereby grant the Organization the irrevocable, non-exclusive, royalty-free right to use, reproduce, modify, alter, publish, and distribute any collected or created content of you in all media formats, including without limitation print, digital, and online platforms. These rights are granted for the purpose of promoting the Organization's mission and activities, as well as in connection with the application for benefits from the Organization. You acknowledge that this grant of rights is made voluntarily and without expectation of compensation, and that the Organization may use the media for promotional and marketing purposes indefinitely, unless otherwise specified in writing. You retain the right to request the removal of specific media from future use, subject to the Organization's reasonable ability to comply with such requests. You have the right to request the use of an alias name and/or location.

#### III. Purpose of Use

The purpose of this Release is to allow the Organization to utilize any collected or created media of you to further its mission and activities. The media will be used for promotional and marketing purposes, including but not limited to, showcasing the Organization's initiatives, events, and impact on the community. This use is integral to the Organization's efforts to raise awareness and support for its cause, including encouraging others to donate to the Organization. Additionally, the media will be employed in connection with the application for benefits from the Organization, ensuring that the Organization can effectively communicate its objectives and achievements to potential supporters and stakeholders. You acknowledge that the media may be used in various formats, including print, digital, and online platforms, to maximize outreach and engagement.

#### IV. Acknowledgment of Voluntary Execution

You acknowledge and agree that the execution of this Release is freely agreed upon and voluntary. Your signature below means you understand and support the Organization's ability to utilize the media for promotional purposes and that it is integral to the application process and the subsequent receipt of benefits. You further acknowledge that you have the option to decline executing this Release without affecting your eligibility for benefits from the Foundation.

## V. Release & Waiver of Claims

By executing this Release, you hereby release, waive, and discharge the Organization, its officers, directors, employees, agents, and assigns from all claims, demands, and causes of action that you may have, whether known or unknown, arising out of or related to the use of any media as authorized by this Release. This release extends to any future claims that may arise from the use of the media in promotional and marketing materials.

You acknowledge that this Release is given voluntarily and with full understanding of its terms and implications. You further understand that this release is a voluntary condition for receiving benefits from the Organization, and that by signing this Release, you waive any right to seek compensation or assert claims against the Organization related to the use of your media.

#### VI. Anonymity Provision

You have the right to elect to use a pseudonym of the Organization's choosing for your identity and location in any media created by the organization. Additionally, you permit the Organization to modify the media via Photoshop or similar tools to enhance anonymity, but not for misleading purposes. Alternatively, you may place a time limit on the use of any Organization-created media. To exercise this right, you must provide notice in writing to the Organization, describing the specific media to be removed.

#### VII. Governing Law

This Release shall be governed by and construed in accordance with the laws of the State of Tennessee, without regard to its conflict of laws principles. Any disputes arising out of or related to this Release shall be subject to the exclusive jurisdiction of the courts located in Sumner County, Tennessee. You agree to submit to the personal jurisdiction of such courts for the purpose of litigating any such disputes.

## VII. Signatures

By signing below, you acknowledge and agree to the terms and conditions set forth in this Release and confirm that you are freely and voluntarily entering into this agreement.

Signature of Participant:	
Signature:	
Printed Name:	
Date:	
Signature of Parent/Guardian (if applicable):	
Signature:	
Printed Name:	
Date:	

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