

Madgy Malawi Foundation – Photo and Media Consent Form

(English / Chichewa)

Purpose / Cholinga

The Madgy Malawi Foundation sometimes takes photographs or videos of patients and their care to share the important work being done in Malawi. These photos may be used on the Foundation's website, social media, or printed materials to help educate others and encourage support. No payment is given for photos. Your care will not be affected if you choose not to allow your photo to be used.

Madgy Malawi Foundation nthawi zina imatenga zithunzi kapena makanema a odwala ndi chisamaliro chawo kuti igawane ntchito yofunika yomwe ikuchitika ku Malawi. Zithunzi izi zingagwiritsidwe ntchito pa tsamba lawo, pa ma social media, kapena m'mabuku ofalitsidwa kuti aphunzitse ena ndi kulimbikitsa thandizo. Palibe ndalama zomwe zimaperekedwa chifukwa cha zithunzi. Chisamaliro chanu sichidzakhudgidwa ngati musasankhe kulola kugwiritsa ntchito chithunzi chanu.

Consent / Chilolezo

Please check one (✓):

☐ I agree to allow my photo or video to be used for educational and promotional purposes by the Madgy Malawi Foundation.

☐ I do NOT agree to have my photo or video used.

Ndikuvomereza kuti zithunzi kapena makanema anga agwiritsidwe ntchito pothandiza kuphunzitsa ndi kulimbikitsa ntchito ya Madgy Malawi Foundation.

☐ Inde (Yes) ☐ Ayi (No)

Patient / Wodwala

Name: _____

Signature or Mark (X): _____

Date: _____

Witness for Verbal Consent / Mboni ya Chilolezo Cham'kamwa

If the patient cannot read or write, please have a trusted witness read this form aloud in a language they understand, confirm their response, and sign below.

Patient gave verbal consent: ☐ Yes ☐ No

Witness Name: _____

Signature: _____

Date: _____

Relationship to Patient (e.g., family, nurse, translator): _____

Foundation Use Only

Trip Year: _____

Description of patient/identification for administrator: _____

Photographer/Volunteer: _____