

Letters to the Woman Awakening™

Story Submission & Permission Form

Thank you for trusting me with your story.

Sharing your story is an act of courage, and I consider it an honor to receive it. Before I do, I want to ensure we both understand how your story may be used and that your wishes are respected.

Contact Information

Full Name: _____

Preferred Name (if different): _____

Email Address: _____

May I Contact You?

☐ Yes, if there are questions regarding my submission.

☐ No, I prefer not to be contacted.

How Would You Like Your Story Shared?

☐ Please use my full name.

☐ Please use my first name only.

☐ Please use a nickname.

☐ Please keep my story completely anonymous.

Story Permissions

Please read each statement carefully and check each box to indicate your agreement.

- ☐ I confirm that this story is my own personal experience, or that I have permission to share it.
- ☐ I understand that Shelly Reflections may edit my story for grammar, spelling, formatting, length, or clarity while preserving the heart and meaning of my message.
- ☐ I understand that submitting my story does not guarantee it will be published, read publicly, featured on a podcast, included in a book, or shared through any other Letters to the Woman Awakening or Shelly Reflections project.
- ☐ I grant Shelly Reflections a **non-exclusive, royalty-free license** to read, reproduce, edit, publish, and share my submitted story in connection with Letters to the Woman Awakening and related Shelly Reflections projects, including print, digital, audio, video, podcasts, books, social media, and future publications, while honoring my anonymity preference.
- ☐ I understand that I retain ownership of my story and may share it elsewhere if I choose.
- ☐ I understand that I will not receive financial compensation if my story is selected for publication, public reading, or inclusion in future Shelly Reflections projects.
- ☐ I understand that **it is not the intention of Shelly Reflections to sell, rent, trade, or license my submitted story to third parties. My story will be used solely in connection with Shelly Reflections, Letters to the Woman Awakening, and related projects created to witness, encourage, inspire, educate, and support women, while honoring the permissions I have granted through this agreement.**
- ☐ I understand that my personal contact information will remain private and confidential. Shelly Reflections will **never sell, rent, trade, or share** my personal contact information with third parties except as required by law.

Submission Contribution

I understand that a minimum contribution of **\$5.00** accompanies each story submission to help support the continued growth of Letters to the Woman Awakening and provide a space where women's stories can be received, witnessed, and preserved.

Signature

By signing below, I acknowledge that I have read, understand, and voluntarily agree to the terms of this Story Submission & Permission Form.

Signature: _____

Date: _____

"Every story matters.

Thank you for allowing me to witness a part of your journey."

— **Shelly Echols**

Founder, Shelly Reflections