

COMPANY Photograph & Video Release Form

I hereby grant permission to the rights of my image, likeness and sound of my voice as recorded on a photographic image, audio or video tape or otherwise (the "material") without payment or any other consideration. I understand that the material may be edited, copied, exhibited, published or distributed and waive the right to inspect or approve the finished product. Additionally, I waive any right to royalties or other compensation arising or related to the use of the material. I also understand that this material may be used in diverse settings within an unrestricted geographic area.

By signing this release I understand this permission signifies that the material may be electronically displayed via the Internet or in the public educational setting.

There is no time limit on the validity of this release nor is there any geographic limitation on where these materials may be distributed or used.

By signing this form I acknowledge that I have completely read and fully understand the above release and agree to be bound thereby. I hereby release any and all claims against any person or organization utilizing this material for educational purposes.

Full Name _____

Street Address/P.O. Box _____

City _____

Province/State _____

Postal Code/Zip Code _____

Phone _____ Fax _____

Email Address _____

Signature _____ Date _____

If this release is obtained from a presenter under the age of 19, then the signature of that presenter's parent or legal guardian is also required.

Parent's Signature _____ Date _____