

Media Release Form for Minor Children

Please provide all the information asked for below.

Name: _____

Parent/Guardian's Name: _____

Home address:

I, Parent/Legal Guardian of (child's name) _______ hereby grants permission to A Legacy of Giving, its agents and assigns, to use above named child's photo or video, and likeness for the purpose of promotion by A Legacy of Giving for all forms, media and manners, for the following, but not limited to, news releases, photographs, video, audio, website, marketing, advertising, trade, promotion, exhibition for an indefinite period of time.

I give unrestricted permission for images, videos, and recordings of the child to be used in print, video, digital and internet media. I agree that these images and/or voice recordings may be used for a variety of purposes and that these images may be used without further notifying me.

I further acknowledge that I will not be compensated for these uses and the A Legacy of Giving owns all rights to the images, videos, and recordings, and to any derivative works created from them.

I waive any right to inspect the uses of any printed or electronic copy. I hereby release A Legacy of Giving and its agents and assigns from any claims that may arise from these uses, including without limitation claims of defamation or invasion of privacy, or of infringement of moral rights or rights of publicity or copyright.

This Release expresses the complete understanding of the parties.

Signed:	
Printed Name:	
Date:	
Relationship:	

School Name: _



Media Release Form For Teachers, School Personnel, Adults

Please provide all the information asked for below.

Name: _____

Home address:

I, ______, hereby grant permission to A Legacy of Giving, its agents and assigns, to use my photo or video, and likeness for the purpose of promotion by A Legacy of Giving for all forms, media and manners, for the following, but not limited to, news releases, photographs, video, audio, website, marketing, advertising, trade, promotion, exhibition for an indefinite period of time.

I give unrestricted permission for the images, videos, and recordings of me to be used in print, video, digital and internet media. I agree that these images and/or voice recordings may be used for a variety of purposes and that these images may be used without further notifying me.

I further acknowledge that I will not be compensated for these uses and the A Legacy of Giving owns all rights to the images, videos, and recordings, and to any derivative works created from them.

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This Release expresses the complete understanding of the parties.

Signed: ______

Printed Name:_____

Date: ______

School Name: _____