## Photograph, Video and Voice Recording Consent, Waiver, Indemnity and Release Form

Photographs, Videos and Recordings

	and its representatives to photograph and video me, and ordings of my voice at the event or location noted below.
Event/Location	Date
and distribute and create derivative works of later developed as well as my name for p	ves the right to reproduce, use, exhibit, display, broadcast these images and recordings in any media now known or promoting, publicizing or explaining the City's and its ive, educational or research purposes. I acknowledge that rdings.
First and Last Name (Printed)	
E-mail	Phone
Parent/Guardian Name (if under age 18)	

Waiver, Indemnity and Release

I hereby waive any right to inspect or approve the use of the images or recordings or of any written copy. I further waive all moral rights. I also waive any right to royalties or other compensation arising from or related to the use of the images, recordings or materials.

I hereby release the City, its Councillors, officers, employees or agents from and against any claims, damages or liability arising from or related to the use of the images, recordings or materials, including but not limited to claims of defamation, invasion of privacy, or rights of publicity or copyright infringement, or any misuse, distortion, blurring, alteration, optical illusion or use in composite form that may occur or be produced in taking, processing, reduction or production of the finished product, its publication or distribution.

I am 18 years of age or older and I am competent to contract in my own name. I have read this document before signing below, and I fully understand the contents, meaning and impact of this consent, waiver, and release. This consent, waiver and release is binding on heirs, my executors, administrators, assigns and me.

Signature (if 18 years or older)	Date
Signature of Parent/Guardian (if under age 18)	 Date
Signature of Witness	 Date