

PARTICIPANT CONSENT & RELEASE FORM

I, _____, hereby grant PATHWAYS and its program partners permission to use my likeness in a photograph, video, or other digital media in any and all of its publications, including web-based publications.

I authorize PATHWAYS and its partners to edit, alter, copy, exhibit, publish, or distribute such material, including my name, for any lawful purpose. In addition, I waive any right to inspect or approve the finished product wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photo.

I understand and agree that all photos will become the property of PATHWAYS and will not be returned.

I hereby hold harmless, release, and forever discharge PATHWAYS from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

I understand that I may decline to give my consent (by not signing this Form and notifying the program organizers) and still continue to participate in all program activities.

Participant's Signature

Date

Printed Name

Email Address

Participant's Home City

**** If applicable, FOR MINOR PARTICIPANTS:**

I, _____, as the parent or legal guardian of the program participant, grant the above consents and authorizations on behalf of my minor child or ward.

Parent's / Guardian's Signature

Date

Printed Name

Email Address