

CONSENT AND RELEASE FORM

I hereby grant to The McShin Foundation the right, for as long and as often as they may elect, to copyright and/or publish in photographs, video, print, electronic, or any other media my name, statements and/or performance in whole or in part for purposes of: public education and information, illustration, promotion, art, editorial, trade, or any other lawful purpose.

- I grant these rights forever for the use of news, education, art, the Internet and World Wide Web, and or any other lawful purpose whatsoever related to McShin Foundation products and materials.
- I waive any right to inspect and/or approve any products that are developed by The McShin Foundation.
- I waive any right to inspect and/or approve the uses of the product.
- I also release The McShin Foundation, its agents, and officers from any and all claims relating to or arising from the uses above.
- I understand that under no circumstances will I have any right to maintain any cause of action against The McShin Foundation because of this agreement.

I am of full legal age and have the right to sign this contract in my own name. If I am not of full legal age, my parent or guardian will sign on my behalf.

I have read the above statement prior to signing this form and the staff has addressed my questions. I fully understand the content of the agreement and enter into it knowingly and willingly. This consent and release is binding upon me, my heirs, my legal representatives and assigns.

VERY IMPORTANT: Complete all information below. The first three lines of information will be used to identify you on screen (unless you are an actor appearing in a character role), so please fill them out exactly as you want the information to appear (we have the right to abbreviate some information on screen). Please type or print.

Name (include any desired prefix, suffix, degrees, rank, or other information that should accompany your name)

Title (or a word or phrase that describes who you are, such as Health Specialist; Person in Recovery; Student; and so on)

Organization or Company (if appropriate)

Address

City, State, Zip Code

Phone number

E-mail

Date

Signature

Signature of parent or guardian (if client is not yet 18 years old)