

**PERSONAL RELEASE  
PHOTO, VIDEO AND AUDIO**

**Grant**

I, \_\_\_\_\_, hereby expressly and irrevocably grant to United Way of the National Capital Area ("UWNCA") and UWNCA's assigns, licensees, and successors the right to photograph/ video/ film me and to use my image and name in all forms and media including composite or modified representations for all purposes, including communications, promotions, advertising, trade, or any commercial purpose in connection with UWNCA throughout the world and in perpetuity. I waive the right to inspect or approve versions of my image used for publication or the written copy that may be used in connection with the images, and I waive any right to royalties or other compensation from or related to the use of my image.

I further give UWNCA and UWNCA's assigns, licenses, and successors an express and irrevocable grant to make audio recordings of my voice in all forms and media including modified representations for all purposes, including communications, promotions, advertising, trade, or any purpose in connection with UWNCA throughout the world and in perpetuity. I waive any right to inspect or approve the dialogue or electronic matter whether that is known to me or unknown, and I waive any right to royalties or other compensation from or related to the use of the audio media recordings.

**Release**

I release UWNCA and UWNCA's assigns, licensees, and successors from any and all damages or claims that may arise regarding the use of my image or audio (voice), including any claims of defamation, invasion of privacy, or infringement of moral rights, rights of publicity, or copyright. UWNCA is permitted, although not obligated, to use my name as a credit in connection with the image or voice recording.

UWNCA is not obligated to utilize any of the rights granted in this Agreement.

I have read and fully understand this Agreement and I am over the age of 18. This Agreement expresses the complete understanding of the parties.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ & address \_\_\_\_\_

Witness: \_\_\_\_\_

**PARENT/GUARDIAN CONSENT [include if the person is under 18]**

I am the parent or guardian of the minor named above. I have the legal right to consent to and do consent to the terms and conditions of this release.

Parent/ Guardian Name: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ & address \_\_\_\_\_

Witness: \_\_\_\_\_