

VIDEO AND INTERVIEW CONSENT AND RELEASE FORM

(first and last name of "Recorded Party")

I, _____, hereby authorize Healthy DC & Me Leadership Coalition/MITV and its subsidiaries the right and permission to copyright and/or publish, reproduce or otherwise use my name, voice, and likeness in video, photographs, written materials, and audio-visual recordings. I acknowledge and understand these materials about or of me may be used for both commercial and/or non-commercial purposes.

I understand that my image may be edited, copied, exhibited, published and/or distributed. I also understand this material may be used individually or in conjunction with other media in any medium, including without limitation to print publications, digital publications, and/or public broadcast for any lawful purpose. There is no time limit on the validity of this release nor is there any geographic limitation on where these materials may be distributed.

I hereby acknowledge and grant Healthy DC & Me Leadership Coalition/MITV, its subsidiaries and its employees, agents, licenses, successors, and third-party organizations all ownership rights and the irrevocable right and permission to use, copyright, publish, sell, distribute, and/or promote the recorded video, photo, interview, and/or audio.

I understand my participation is voluntary and that I may, at any time, discontinue my involvement before signing this document. If I choose to discontinue participation, I will notify the principal parties Healthy DC & Me Leadership Coalition/MITV and its subsidiaries by providing written notice 7 days from the date of signature.

I understand that Healthy DC & Me Leadership Coalition/MITV and its subsidiaries can see no risk presently, and that I take full responsibility for my involvement in this project and the risks that it may entail (be they legal, physical, or mental) and release Healthy DC & Me Leadership Coalition/MITV and its subsidiaries from any claims, demands, losses, damages, suits, and liabilities of any kind whatsoever in connection with the foregoing.

I hereby certify that I am over eighteen years of age and am competent to contract in my own name insofar as the above is concerned. If I am under eighteen years of age, my parents or legal guardians have read this document and have given their consent by signing below.

By signing this form, I acknowledge that I have completely read and fully understand the above consent and release and agree to be bound thereby. I hereby release any and all claims against any person or organization utilizing this material for marketing, educational, promotional, and/or any other lawful purpose whatsoever.

Participant Name (please print): _____

Participant Signature: _____

Date: _____