



MAXIMIZE
NWMO

Dream big and grow together.

Standard Release Agreement

Photo, Video, Audio Media Use and Ownership

I grant permission to Maximize Northwest Missouri [Maximize NWMO], a regional vitality initiative of The Community Foundation of Northwest Missouri, and those working on their behalf and in partnership with, to record my likeness, photography, name, image, and/or voice hereby referred to as "media" digitally and/or on film, tape, or otherwise for their use to educate about and promote the understanding of the initiative and its projects. I understand that the media has been secured with permission from its owner or is being produced and owned by Maximize NWMO.

I acknowledge that media secured with my participation may be edited and used in whole or in part as desired in any way by Maximize NWMO including, but not limited to, being reproduced, duplicated, and used for non-theatrical audiovisual information, public relations, fund investment/development, and general promotional and educational purposes. I also consent to the use of all media for all purposes including duplication, sales, postings, listed above in print, radio, television, other broadcast, signage, exhibition, and/or online platforms such as social media and the website in perpetuity.

I also understand that Maximize NWMO has no obligation to use the media, that I have no rights to the media or any benefits derived from it or its distribution, and that I shall not receive any compensation for my participation unless otherwise outlined in a separate agreement. I confirm that any and all material furnished by me for this initiative is either my own or otherwise authorized for such use without obligation to any third party or me.

I represent that I have the right to enter into this Agreement and that my performance and the rights I have granted in this Agreement will not conflict with or violate any commitment or understanding I have with any other person or entity.

I expressly release Maximize NWMO from any and all claims arising out of the use of this media.

_____ I understand that my signature indicates I have read, understand and approve of this Agreement.

_____ As the parent/legal guardian of the participant/subject I understand that my signature indicates I have read, understand and approve of this Agreement on behalf of my son/daughter/charge who is under the age of 18 years.

Participant/Subject NAME

Parent/Legal Guardian NAME

Participant/Subject SIGNATURE

Parent/Legal Guardian SIGNATURE

Date

Date

Mailing Address: _____

City: _____ *State:* _____ *Zip Code:* _____

Phone: (_____) _____ - _____ *Email:* _____