

VIDEO RECORDING CONSENT FORM

Location: _____ Date: _____

Participant Information:

Full Name: _____

Address: _____

Phone Number: _____

Email Address: _____

Consent Grant:

I hereby grant permission to the Company, its agents, employees, licensees, and assigns, to record, use, reproduce, and publish video footage and/or photographs of me, including my image, voice, and likeness, for promotional, advertising, educational, or any other lawful purpose. I understand and agree that such recordings may be edited, copied, exhibited, published, or distributed and waive the right to approve the finished product wherein my likeness appears.

Use of Recordings:

I understand that the recordings may be used in various media formats, including but not limited to, websites, social media, television, print materials, and presentations, without restriction as to geographic area or time. I waive any right to inspect or approve the finished recordings or any uses to which they may be applied.

Release and Waiver:

I release and discharge the Company, its agents, employees, licensees, and assigns from any claims, demands, or causes of action that I may have by reason of anything contained in the recordings, including but not limited to claims for defamation, invasion of privacy, or infringement of moral rights or rights of publicity.

No Compensation:

I acknowledge that I will receive no compensation or other remuneration for the use of the recordings or the rights granted herein.

Participant Representations:

I represent that I am of legal age and competent to enter into this agreement. If I am signing on behalf of a minor, I represent that I have the legal authority to consent on behalf of that minor.

Governing Law:

This Consent Form shall be governed by and construed in accordance with the laws of the United States of America and the applicable state law, without regard to conflict of laws principles.

Participant Signature:

Printed Name: _____

Participant's Signature

Witness's Signature

Signature: _____

Signature: _____

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