



IMAGE AND NAME CONSENT AND RELEASE FORM: MINORS

I, the parent and/or legal guardian of the child named below, hereby give consent to Swamp Donkey Musical Theatre Society, its employees, volunteers, agents, assigns, legal representatives and/or parties designated by the Society (collectively the "Society") to take photographs, video recordings, and/or audio recordings of the child and to use such photographs, video recordings, and/or audio recordings (collectively the "Child's Images") and the child's name in connection with the Child's Images in all forms of media including but not limited to print media, digital media, the internet, social media sites, media releases, and broadcasts for any and all promotional purposes including but not limited to advertising, display, audiovisual, exhibition, and editorial use.

I understand that my consent cannot be revoked once the Child's Images and/or the child's name have been published in electronic or print form. I further understand that the Society cannot control unauthorized use of the Child's Images and/or the child's name by persons not associated with the Society once the Child's Images and/or the child's name have been published.

I waive any right I have to inspect or approve any publication of the Child's Images and/or the child's name by the Society. I understand and agree that I will not receive any payment or royalty for the publication of the Child's Images and/or the child's name.

I hereby release and waive any and all claims I now have or may have in the future against the Society arising from the use and/or publication of the Child's Images and/or the child's name.

I agree that this agreement shall be effective and binding upon my heirs, next of kin, executors, administrators, assigns, and representatives, in the event of my death or incapacity.

In entering into this agreement, I am relying only on the recitals and agreements of this document and of those attached hereto and provided herewith by the Society, and no other verbal or written communications or representations.

I certify that I have carefully read and fully understand the provisions of this consent and release and agree to be bound by them. I understand that I am giving up certain legal rights that I may have against the Society by signing this consent and release.

Name of Minor

Signature

Witness Signature

Print Name Clearly

Witness Print Name Clearly

Date

Date