



VIDEO/PHOTOGRAPH RELEASE FORM

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If the photo provided was taken by my institution or for use by my employer, I acknowledge that I been granted the rights to use this likeness of me as I see fit, and/or that I have gained the necessary release and approval to share this photograph with AMWA for use on it's website and in promotional materials with no limitations.

If necessary—Please include the following wording to accompany the image text to recognize the owner/photographer of this image: Photo Courtesy _____. [Put N/A if not applicable]

I understand and agree that such photographs and/or video recordings of me may be placed on the Internet for non-commercial use. I also understand and agree that I may be identified by name and/or title in printed, online or broadcast information that might accompany the photograph(s) and/or video recording that include me. I waive the right to approve the final product. I agree that all such pictures, photographs, images, video and audio recordings, and any reproductions thereof, and all plates, negatives, recording tape and digital files produced by AMWA are and shall remain the property of the organization.

I hereby release, acquit and forever discharge the State of Illinois, AMWA, its current and former trustees, agents, officers and employees of the above-named entities from any and all claims, demands, rights, promises, damages and liabilities arising out of or in connection with the use or distribution of said photographs and/or video recordings, including but not limited to any claims for invasion of privacy, appropriation of likeness or defamation.

I hereby warrant that I am at least eighteen (18) years old and competent to contract in my own name. This release is binding on me and my heirs, assigns, and personal representatives.

Signature of Individual Photographed/Recorded

Date

Printed Name of Individual Photographed/Recorded: _____

Signature of Witness

Date