

BLACKBIRD DANCE COMPANY PROGRAMS

AUDIO/PHOTO/VIDEO MEDIA RELEASE FORM

NAME(s): _____

email: _____

ADDRESS: _____

CITY, ZIP: _____

PHONE(s): _____

Class interests: _____

Injuries/allergies/medical issues: _____

I grant permission to *Blackbird Dance Co* and its agents or employees to use photographs and/or video and audio taken of me, or my minor (s). These images may be used in educational and documentary materials such as Public Service Announcements, Grant Applications, Video Documentaries and both printed and online newsletters. Furthermore, I authorize the use of my/my minor(s) image, likeness, and voice for all program promotion, materials, and any other purposes in connection with the program deemed appropriate and necessary by *Blackbird Dance Co*.

I agree to BDCo and all its affiliates, board members and instructors harmless for any personal injury or harm due to my/or my minor(s) participation in classes and/or workshops, and/or events held at any location representing BDCo. Further, I understand the personal risks involved with participating in such physical activities and I will be solely responsible for my own actions and consequences in choosing to participate, or choosing my minor(s) to participate.

I hereby agree to release, defend, and hold harmless *Blackbird Dance Co* and its agents or employees, including any firm publishing and/or distributing the finished product in whole or in part, whether on paper, via electronic media, or on Web sites, from any claim, damages, or liability arising from or related to the use of the photographs/video, including but not limited to any misuse, distortion, blurring, alteration, optical illusion, or use in composite form, either intentionally or otherwise, that may occur or be produced in taking, processing, reduction, or production of the finished product, its publication, or distribution.

Signature: _____

Print Name: _____

TODAY'S DATE: _____

How did you hear about us? _____

I am 18 years of age or older and have read this release before signing below, fully understanding the contents, meaning, and impact of this release. I understand that I am free to address any specific questions regarding this release by submitting

those questions in writing prior to signing, and I agree that my failure to do so will be interpreted as a free and knowledgeable acceptance of the terms of this release.

Name (please print)

Signature

Date