

PHOTO RELEASE

I hereby grant the Whitin Community Center and the Blackstone River Valley Greenway Challenge Steering Committee permission to use my likeness in a photograph in any and all publications, including website entries and social media, without payment or any other consideration in perpetuity. I understand and agree that these images will become the property of the Blackstone River Valley Greenway Challenge Steering Committee.

I hereby irrevocably give permission to edit, alter, copy, exhibit, publish or distribute photos for the purposes of publicizing the Blackstone River Valley Greenway Challenge. In addition, I waive the right to inspect or approve the finish, including written or electronic copy, wherein my likeness appears. Additionally, I waive the right to royalties or other compensation arising or related to the use of the photography.

I hereby hold harmless and forever discharge the Whitin Community Center and the Blackstone River Valley Greenway Challenge Steering Committee from all claims, demands and causes of action which I, my heirs, representatives, executors, administrators or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

I am registered to participate in the Greenway Challenge being held on _____
Date *Initial*

I am 18 years of age or older and am competent to contract in my own name _____
Initial

I am 16-18 years of age and I have obtained my parent/guardian's consent _____
Initial

I have read this release before signing below and fully understand the contents, meaning and impact of this release. I agree to indemnify and hold the Whitin Community Center and the Blackstone River Valley Greenway Challenge Steering Committee harmless for any and all losses, claims expenses, suits, costs, demands and damages or liabilities on account of personal injury, death or property damage of any nature whatsoever and by whomever made, arising out of photographed activities in which I am taking part.

Signature *Print Name*

Address *City* *State* *Zip*

Daytime Phone # *Date*

If the person is under age of 18, there must be a consent by a parent or guardian as follows:

I hereby certify that I am parent/guardian of _____, and do hereby give my consent without reservation to the foregoing on behalf of this person.

Signature of parent/guardian *Printed Name* *Date*