



Honoring Phil Tripodi's love of helping children



PHOTO/VIDEO RELEASE FORM

For good and valuable consideration, in exchange for being filmed, recorded, and/or photographed in connection with A Moment to Smile, I agree as follows:

I, _____, irrevocably grant to A Moment to Smile, Inc. ("A Moment to Smile"), its successors and assigns, and any person or company that obtains any rights from A Moment to Smile described in this document ("licensees") the perpetual, worldwide right to use, publish, and reproduce, for all purposes related to the mission of A Moment to Smile, including but not limited to my name, image, likeness, voice, and/or quotations in any and all media, languages, formats and markets now known or hereafter devised for use in connection with the mission of A Moment to Smile.

I further grant A Moment to Smile all right, title, and interest that I may have in all materials created by A Moment to Smile, including but not limited to, finished pictures, negatives, reproductions, and copies of the original works, and further grant the right to give, sell, transfer, and exhibit the works in copies or facsimiles thereof, for promotional, commercial or other purposes, as it relates to A Moment to Smile.

I release A Moment to Smile, its licensees, and any company or person employed by or related to A Moment to Smile from all liabilities and claims, whether known or unknown, asserted or unasserted, that relate in any way to the rights I have given to A Moment to Smile in this document or my participation or the participation of the minor child listed below in any activities related to A Moment to Smile.

I waive the right to receive any payment for signing this release and waive the right to receive payment for A Moment to Smile's use if any of the material described above for any of the purposes authorized by this release. I also waive any right to inspect or approve finished photographs, audio, video, multimedia, or advertising recording and copy or printed matter or computer generated scanned image and other electronic media or any media that may be used in conjunction therewith or to approve the eventual use that it might be applied. Further, I hereby release A Moment to Smile from all claims of every kind on account of such use.

By signing this form, I acknowledge that I have completely read and fully understand the above and agree to be bound thereby.

Print Name: _____

Signature: _____ Date: _____

Complete the following if above individual is a minor: I, the undersigned, warrant and represent that I am the parent or legal guardian of _____ referred to above. I have read the Photo/Video Release and am fully familiar with the contents thereof and I hereby grant permission and consent to all of the foregoing.

Print Name: _____

Signature: _____ Date: _____

A Moment to Smile is a 501(c)(3) Non-Profit Organization

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