

# Media release forms

Name of representative: \_\_\_\_\_

Business/Organization: \_\_\_\_ (AET) Anthea Education Trust \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Subject/Participant (the "Releasor"):

Name: \_\_\_\_\_

Role of participation:

\_\_\_\_\_  
(Photographer / videographer/ model / artist/ performer/ interviewee etc)

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal code: \_\_\_\_\_

## 1. Authorization and Release

I, the undersigned, hereby grant to the listed above, their representatives, employees, licensees, and assigns (collectively referred to as the Anthea Education trust (AET) the irrevocable and unrestricted right to:

- Photograph, film, and record me in any format (photo, video, audio);
- Use, edit, and publish any photographs, videos, or audio recordings of me taken by the Photographer; and

- Use, reproduce, and publish any photographs or videos that I voluntarily provide to the AET.

This authorization applies for any lawful purpose, including but not limited to advertising, social media, promotion, marketing, website content, and commercial distribution, in any media now known or hereafter developed.

## 2. Ownership and Usage

I understand and agree that:

- All photographs and videos taken by the AET Photographer or taken by me which are voluntarily given to AET remain the property of the Anthea Education trust (AET) - I will not receive any compensation for the use of such media.
- The AET is under no obligation to use any of the media.

## 3. Waiver

### PHOTO & VIDEO RELEASE FORM

I waive any right to inspect or approve the finished product wherein my likeness appears, and I release the Photographer from any and all claims, demands, and liabilities in connection with the use of these materials, including but not limited to claims for libel, invasion of privacy, or infringement of publicity rights.

## 4. Age Confirmation

I am 18 years of age or older and fully competent to sign this release.

I am under 18 years of age. My parent/legal guardian has signed below on my behalf.

## 5. Signature

I have read this release form carefully and fully understand its contents. By signing below, I confirm that I voluntarily give this authorization and release.

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_

If subject is under 18:

Parent/Guardian Signature:

\_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_