



Photography/Video Release and Waiver

I hereby grant permission to Alta California Regional Center and its officers, trustees, employees, agents, representatives, successors, licensees and assigns (hereinafter "ACRC") to photograph and/or videotape my image, likeness, or depiction or, if applicable, that of my minor child or other individual for whom I have the legal authority to grant such permission (hereinafter the "Subject.") I hereby grant permission to ACRC to edit, crop, or retouch such photographs and/or videotape footage, and waive any right to inspect the final photographs or videotape footage. I hereby consent to and permit photographs or videotape footage of myself or the Subject to be used for any purpose, including educational and outreach purposes, and in any medium, including print and electronic, and on ACRC's website. I understand that ACRC shall use such photographs and/or videotape footage without associating my or the Subject's name thereto unless I expressly authorize the use of my or the Subject's name with such photographs and/or videotape footage. I further waive any claim for compensation of any kind for ACRC's use or publication of photographs and/or videotape footage of myself or the Subject.

I hereby fully and forever discharge and release ACRC from any claim for damages of any kind (including, but not limited to, invasion of privacy; defamation; false light or misappropriation of name, likeness or image) arising out of the use or publication of photographs and/or videotape footage of myself or the Subject by ACRC and covenant and agree not to sue or otherwise initiate legal proceedings against ACRC for such use or publication on my own behalf or on behalf of the Subject. All grants of permission and consent, and all covenants, agreements and understandings contained herein are irrevocable.

I acknowledge and represent that I am over the age of 18, have read this entire document, that I understand its terms and provisions, and that I have signed it knowingly and voluntarily on behalf of myself or the Subject.

Date: _____

Printed Name: _____

Signature: _____

Subject's Name (if signor is not the subject):

If signing on behalf of the Subject, state your legal relationship to the Subject:

(e.g., legal guardian or parent of minor child, conservator)