



DATE(S):
PROGRAM/PROJECT:
LOCATION:

MEDIA RELEASE FOR EVENT PARTICIPANTS

For good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, I hereby consent and agree to the following:

1. I hereby grant Hispanic Access Foundation permission to use my likeness in a (collective "Media") in any and all publications for public and private purposes, including website entries, without payment or any other consideration in perpetuity. I understand and agree that these materials will become the property of Hispanic Access Foundation and will not be returned. Each of its respective licensees, successors and assigns (each a "Release"), the irrevocable, royalty-free, perpetual, unlimited right and permission to use, distribute, publish, exhibit, digitize, broadcast, display, modify, create derivative works of, reproduce or otherwise exploit my name, picture, likeness and voice (including any video footage of the same) (collectively, "Media"), or to refrain from so doing, anywhere in the world, by any persons or entities deemed appropriate by, for any purpose (except defamatory) including, without limitation, any use for educational, advertising, non-commercial or commercial purposes in any manner or media whatsoever (whether known or hereafter devised) including, without limitation, on the internet, in print campaigns, in-store and via television. I agree that I have no interest or ownership in any of the Media.
2. I hereby hold harmless and release and forever discharge Hispanic Access Foundation 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.
3. I hereby irrevocably authorize Hispanic Access Foundation to edit, alter, copy, exhibit, publish or distribute this collective "Media" for purposes of publicizing Hispanic Access Foundation's programs or for any other lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the Media.

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ADDRESS: _____
CITY _____ STATE _____ ZIP _____
DAYTIME PHONE NUMBER: (____) _____ ADDITIONAL PHONE (optional) (____) _____

**SIGNATURE OF HISPANIC ACCESS REPRESENTATIVE
(REQUIRED):** _____
DATE: _____

**SIGNATURE OF PERSON/GUARDIAN IF UNDER 18
(REQUIRED):** _____
DATE: _____
EMAIL ADDRESS*: _____@_____
*(*will not be used for any other purposes or distributed to third parties)*

PLEASE RETURN THE COMPLETED AND SIGNED RELEASE TO HISPANIC ACCESS FOUNDATION