



RELEASE FORM

Authorization for Release of Photograph, Voice, Use of Likeness or Printed Quotes or Statements

I hereby release to the Chicago Cook Workforce Partnership ("The Partnership") its officers, agents, employees and/or affiliates the rights of \_\_\_\_\_{entity or individual's) photograph, image, likeness, representative's voice as recorded on videotape or film and any oral or written statement(s) regardless of format (whether they are direct quotes or paraphrased by the Partnership) for the purpose of promotion videos, publications, and marketing material including Internet publications related to any Partnership Program. I hereby release any and all claims against the Partnership its officers, agents, employees and/or affiliates arising out of or in connection with the usage of \_\_\_\_\_ (entity or individual's) photo, likeness, representative's voice and/or oral or written statement(s) regardless of format (whether they are direct quotes or paraphrased by the Partnership) for the purpose of promotion videos, publications and marketing material including Internet publications. I acknowledge that this release is legally binding and understand that this is the entity or individual's final notice regarding this matter and that the Partnership, its officers, agents, and/or affiliates may proceed in reliance thereon. The undersigned in this release desires to assist in the work of the Partnership, its officers, agents, employees and/or affiliates by making the entity or individual's image, likeness, representative's voice and/or oral or written statement(s) available for the Partnership's program marketing publication(s) related to any Partnership Program. By signing below, I acknowledge that for good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, I, on behalf of \_\_\_\_\_ (entity or individual) hereby release, indemnify, and hold harmless, the Partnership, its officers, agents, employees and/or affiliates from and against any and all claims, losses, suits, damages, or costs {including reasonable attorney's fees) arising out of, resulting from or relating to the entity or individual's participation in the Partnership's marketing publication(s). I further acknowledge that (1) I am a person of legal age and the person identified below who is authorized to execute this release; {2) I have read this release in its entirety; (3) I fully understand and accept its terms; and (4) I have executed this release voluntarily.

FOR AN ENTITY:

Names of entity: \_\_\_\_\_ Entity's representative furnishing oral or written statement(s)-printed: \_\_\_\_\_

Date picture taken and/or oral or written statement was made: \_\_\_\_\_

Authorized Representative Signature and Title \_\_\_\_\_ Date \_\_\_\_\_

FOR AN INDIVIDUAL(S):

Individual's name appearing in photograph and/or furnishing oral or written statement(s): \_\_\_\_\_

Minor: Yes \_\_\_\_\_ No \_\_\_\_\_ (If individual is a minor, a parent or legal guardian must execute this authorization on behalf of the minor child on the appropriate line below)

Date picture was taken and/or oral or written statement(s) made: \_\_\_\_\_

Parent or Legal Guardian's signature (and printed name if on behalf of minor child) \_\_\_\_\_ Date \_\_\_\_\_