

Ohio Department of Health ANTI-VAPING VIDEO CONTEST



Anti-Vaping Contest Video Model Release Form

Any person who appears in an Ohio Department of Health (ODH) Anti-Vaping Video Contest entry video must sign an ODH Anti-Vaping Video Model Release Form. All forms must be submitted with the video submission.

I grant unlimited authorization to the students participating in the ODH Anti-Vaping Video Contest, ODH, and those acting pursuant to ODH's authority to:

- (a) Record my participation and appearance in film, videotape or audiotape, digital media formats, photographs, or any other recorded medium (collectively called "recordings") for the ODH Anti-Video Vaping Contest, and related subsequent anti-vaping media campaigns by ODH and any other purpose. I understand that these recordings may be used in any medium, including print, internet, video, audio, or any other medium in any way ODH sees fit.
- (b) Use my name, likeness, voice, and biographical material in connection with the recordings.
- (c) Exhibit or distribute such recordings in whole or part, modified or altered, either by themselves or in conjunction with other media without restrictions or limitation of any kind for any lawful purpose, which ODH and those acting pursuant to its authority, or those to whom it my assign these rights, deem appropriate.

I waive any right I might have to inspect and/or approve the finished medium, or the use to which it may be applied. I acknowledge that all recordings in any format, and other materials made of me and reproductions made from them, are the property of ODH to use in any lawful manner that it sees fit.

I forever release and discharge ODH and those acting pursuant to its authority, or those to whom it may assign these rights, from any and all claims, actions, and demands arising out of or in connection with the use of the recordings and other materials made of me, including, without limitation, any and all claims for invasion of privacy or libel.

I hereby represent that I have read and fully understood the above paragraphs and am knowingly and voluntarily executing this release.

Signature

Date

Name (printed)

If the model signing above is UNDER 18 years of age, consent must be given by his or her parent or guardian by signing below.

I hereby certify that I am the parent and/or legal guardian of the above-named model. I further consent, without reservation, to ODH's making and ODH's (including and those acting pursuant to its authority, or those to whom it my assign these rights) use of recordings and other materials made of the above-named model.

Signature of parent or guardian

Date

Name (printed)