

Photo, Video, and Media Release Form

Full Name of Individual Being Photographed/Recorded (Print):

Address:

City:

State:

Zip Code:

Email Address:

Phone Number:

Parent/Guardian Information (if Subject is under 18 years of age):

Full Name of Parent/Guardian (Print):

Address (if different from above):

City:

State:

Zip Code:

Email Address:

Phone Number:

Photo, Video, and Media Release Form

- Consent and Release:

- For good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, I (or my child/ward, if applicable) hereby grant to the River Falls Chamber of Commerce & Tourism Bureau, its agents, representatives, licensees, successors, and assigns (collectively, the "Organization"), the irrevocable right and permission to photograph, film, videotape, audiotape, create GIFs, digitally record, or otherwise capture my (or my child/ward's) image, likeness, voice, performance, and biographical information (collectively, the "Media").

- Purpose of Use:

- I (or my child/ward, if applicable) understand and agree that the Organization may use the Media, in whole or in part, individually or in conjunction with other media, for any purpose related to the promotion and marketing of the River Falls Chamber of Commerce and Experience River Falls, including but not limited to:
 - Use on the Organization's websites: www.rfchamber.com and www.experiencriverfalls.com
 - Social media platforms (including but not limited to Facebook, Instagram, Twitter, TikTok, etc.)
 - Marketing and promotional materials, such as brochures, advertisements, newsletters, reports, and presentations (both online and offline)
 - Archiving and other internal uses
 - Any other legitimate purpose in connection with the Organization's mission.

- No Compensation:

- I (or my child/ward, if applicable) understand and agree that I (or my child/ward) will not receive any payment or other compensation for granting the rights herein.

Photo, Video, and Media Release Form

- **Waiver of Claims:**

- I (or my child/ward, if applicable) hereby waive any right to inspect or approve the Media or any finished product that may be created using the Media. I (or my child/ward, and on behalf of my/our heirs, executors, administrators, and assigns) hereby release and forever discharge the Organization from any and all claims, demands, actions, causes of action, damages, losses, expenses, and liabilities of any kind or nature whatsoever, whether known or unknown, arising out of or in any way connected with the use of the Media as described herein.

- **Ownership of Media:**

- I (or my child/ward, if applicable) understand and agree that the Organization shall own all rights, title, and interest in and to the Media, including copyright.

- **Duration of Release:**

- I (or my child/ward, if applicable) understand and agree that this release is perpetual and shall continue in full force and effect forever.

- **Governing Law:**

- This release shall be governed by and construed in accordance with the laws of the State of Wisconsin.

Photo, Video, and Media Release Form

- Submission of Content:

- If I (or my child/ward, if applicable) submit or otherwise provide any photographs, video recordings, audio recordings, GIFs, digital images, or other media (collectively, "Submitted Content") to the River Falls Chamber of Commerce & Tourism Bureau, I (or my child/ward, if applicable) represent and warrant that I (or my child/ward) have all necessary rights and permissions to provide such Submitted Content and to grant the Organization the rights to use it as described herein.
- I (or my child/ward, if applicable) hereby grant to the River Falls Chamber of Commerce & Tourism Bureau, its agents, representatives, licensees, successors, and assigns, a non-exclusive, royalty-free, perpetual, irrevocable, and worldwide license to use, reproduce, modify, adapt, publish, translate, create derivative works from, distribute,¹ perform, and display such Submitted Content (in whole² or in part) in any media now known or hereafter developed, for any purpose related to the promotion and marketing of the River Falls Chamber of Commerce and Experience River Falls, without any further consent from or payment to me (or my child/ward)

- Entire Agreement:

- This document constitutes the entire agreement between the parties with respect to the subject matter hereof and supersedes all prior or contemporaneous communications and proposals, whether oral or written.

Signature of Subject (or Parent/Guardian if under 18):

Date:

Printed Name of Signer: