PARTICIPANT RELEASE

I have participated in the Washington FFA Association’s Chapter Video Contest entry as a producer, actor, or other talent.

I acknowledge that the Washington FFA Association, their employees or agents have the right to use these photographs and/or recordings in any and all media, now or hereafter known, and for any purpose whatsoever. This includes the right to use my photograph or recordings on its/their World Wide Web site or in other official publications. I understand that once my image and/or recordings are placed on the World Wide Web, the image or recordings can be downloaded by any computer user. Therefore, I also agree to indemnify and hold the Washington FFA Association and their employees and agents harmless from any claims resulting from this. I understand that my signature on this release constitutes my consent and permission for the video to be used with my talent contribution and that no payment or further consent or permission will be required.

Participant Printed Name:  __________________________________________________________

Washington FFA Chapter Name:  _____________________________________________________

Participant Signature:  ____________________________________  Date: ____________________

If participant is a minor (under 18), a parent/guardian signature is also required:

Parent/Guardian Printed Name:  ______________________________________________________

Parent/Guardian Signature:  _______________________________   Date: ____________________