

HERRICKS INDO-US COMMUNITY

CULTURAL PROGRAM FORM

NAME OF PARENT _____

Address _____

City: _____ State _____ ZIP _____

Tel (Home) _____

Cell _____

Work _____

e-mail _____

NAME OF CHILD _____

DOB _____

Age _____

Name of School _____

Grade _____

NAME OF EVENT _____

EVENT DATE _____

TEACHER'S NAME _____

Herricks Indo-US Community, Inc., often provides a photographer and/or videographer for its events. When possible, the photographer will record an image of each participant during the initial registration and then will capture footage and stills of the participants as they enjoy the event. I hereby grant HIUS, Inc., and its representatives, employees, agents, and assigns, the irrevocable and unrestricted right to use, reproduce, and publish photographs or digital images of the child referenced above, including his or her image and likeness as depicted therein, for editorial, advertising, or any other purpose (e.g. publish on HIUS website, newsletter and other media) and in any manner and medium; to alter the same without restriction; and to copyright the same. I hereby release HIUS, Inc. and their officers, employees, agents, legal representatives, and assigns from any and all claims, action, and liability relating to the use of said photographs or digital images.

I understand that in the age of the Internet, images can be copied and distributed regardless of whether their publication is intended or sanctioned.

I hereby give permission for my child to participate in the above named event.

Signature of Parent _____

Date _____

Name of Parent _____

Please give this form to Cultural coordinator or child's teacher.