MARCH OF DIMES

WAIVER AND CONSENT

I hereby grant the March of Dimes permission to use my name, likeness and/or stories, including without limitation, as depicted in photographs, videos, audio recordings and/or the Family Questionnaire, for educational, public relations, fundraising and other purposes, in any form or medium of communication now known or hereafter devised, including without limitation, print and digital media.

I represent and warrant that I am the owner of the photograph(s) and/or the video(s) described below (if applicable), and hereby grant to MOD an irrevocable, non-exclusive, royalty free license to use the photographs and/or the videos for educational, public relations, fundraising and other purposes at any time in any form or medium of communication now known or hereafter devised, including without limitation, print and digital media.

On behalf of myself and any children identified below, I hereby represent and warrant that I have the right to grant all of the rights I have given under this Waiver and Consent and I hereby waive, release and forever discharge the March of Dimes from any claims or demands in any way relating to the foregoing grant of rights.

Description of Photo/Video: _____

Description of Story: _____

For myself and heirs and assigns: _____

1. _____ _____
[PARENT/GUARDIAN] [DATE]

2. _____ _____
[PRINT NAME] [DATE]

3. _____
[STREET ADDRESS] [CITY] [STATE] [ZIP CODE]

4. _____ _____
[TELEPHONE NUMBER] [EMAIL ADDRESS]

5. _____ _____
[WITNESS] [DATE]

SPACE BELOW FOR MARCH OF DIMES USE ONLY

HOSPITAL OR LOCATION: _____

DESCRIPTION OF SUBJECT: _____

DESCRIPTION OF PHOTO/VIDEO (SCENE OR STILL): _____

DESCRIPTION OF STORY:_____

PROJECT TITLE: _____