

Dr. Martin Luther King, Jr. Call 2 Serve Contest Video Consent, Waiver, and Release Form

*This form must be completed for *all* individuals appearing in the video.

I hereby grant permission to the rights of my picture, image, likeness, actions, voice, in whole or in part, individually or in conjunction with other images, without payment or any other consideration as part of a video submission for the Dr. Martin Luther King, Jr. Call 2 Serve contest sponsored by the Iowa Department of Human Rights.

I waive any and all rights to royalties or other compensation arising from or related to the use of my picture, image, likeness, actions, voice, in whole or in part, as part of a video submission for the Dr. Martin Luther King, Jr. contest sponsored by the Iowa Department of Human Rights

I waive any and all rights of privacy or compensation that I may have in connection with such use of my picture, image, likeness, actions, voice, in whole or in part, and expressly waive any applicable protections provided by the Children's Online Privacy Protection Act (COPPA) and rules promulgated thereunder.

I understand that this video will be uploaded to Iowa Department of Human Rights' website and/or other websites or pages operated by the Iowa Department of Human Rights. I grant the Iowa Department of Human Rights the unrestricted right to reproduce and use the video in which my picture, image, likeness, actions, or voice appear, in whole or in part, for the promotion of Martin Luther King Holiday and the Iowa Department of Human Rights.

I hereby release the Office on the Status of African Americans, the Iowa Department of Human Rights, the State of Iowa, and all affiliated employees from any and all claims, demands, and liabilities of every kind on account of such use of my picture, image, likeness, actions, voice, in whole or in part.

Name of school/classroom: _____

Name of person in video: _____

I am 18 years of age or older and have read this waiver/release form in its entirety, understand its contents, and consent to the terms and conditions described herein.

Signature

Date

I am the parent or guardian of the minor named above and have the legal authority to execute a waiver/release on his or her behalf. I have read this waiver/release form in its entirety, understand its contents, and consent to the terms and conditions described herein.

Name of parent/guardian: _____

Signature

Date