

Photo/Video Release

*The individual person named below (“Releasor”) is signing this Photo/Video Release (“Release”) for purposes of allowing The Nancy Lurie Marks Family Foundation (“NLMFF”) or its designee to use one or more photographs and/or video recordings (collectively, “Recordings”) of such person for any purpose consistent with NLMFF’s charitable mission, including without limitation for purposes of the project known as Autism around the Globe (“AATG”). By signing this Release, such person acknowledges that they have freely consented to NLMFF’s use of the Recordings on the terms set forth herein and has signed this Release of their own free will. If the Releasor is under age 18 or has a legal guardian, a parent or guardian of the Releasor must sign on the Releasor’s behalf.*

1. I understand that I am providing NLMFF, either directly or through another person who is contributing to the AATG project, with one or more Recordings that feature my voice, image, and/or likeness. Copies of these Recordings are attached to or otherwise submitted with this Release and are described below.
2. I understand that NLMFF will have the non-exclusive right to use and disseminate the Recordings of me in all existing and future media (including the Internet) in perpetuity in connection with AATG and for any other purposes consistent with NLMFF’s charitable mission. Unless I have checked the box below my signature, I further agree that my name may be used to identify me as a subject of the Recordings of me.
3. I waive any and all rights of privacy and/or publicity that would otherwise preclude NLMFF’s use of the Recordings of me.
4. I acknowledge that NLMFF has no obligation to use any Recordings of me or to use such Recordings for any particular purpose.
5. I understand that I will receive no monetary payment or other consideration in exchange for the rights to use Recordings of me.
6. I hereby release and forever discharge NLMFF, its affiliates, and each of their respective directors, officers, employees, volunteers, and agents from any and all liabilities, claims, demands, damages, rights, and causes of action of whatever kind, nature, or description, present or future, asserted by me or on my behalf by any other person, including my heirs, executors, or assigns, that arise out of or relate in any way to the use of the Recordings in accordance with this Release.

Brief description of Recordings by type (photo/video), date (if known), and subject matter:

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Signature of Releasor or Parent/Guardian

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Date

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Name (printed)

Name of Parent/Guardian (if applicable)

If box is checked, consent to use name is withheld: [ ]  
(please check if you do not want your name used)