

**RECORDING/VIDEOGRAPHY/PHOTOGRAPHY CONSENT AND AUTHORIZATION FORM**

CONSENT

I give consent to MORE Foundation, an Arizona nonprofit corporation, (“MORE”) to record, video, and/or photograph me and my presentation or related educational material on the date and for the event and location listed below (the “Recording”).

Unless I request otherwise, my name and professional affiliation will be clearly associated with the Recording.

AGREEMENT

For good and valuable consideration herein acknowledged as received, I hereby agree as follows:

- 1. Photos, Videos, Recording, Presentation.** This agreement (“Agreement”) applies to any and all photos, videos, recording, and presentation or educational material for the event identified.
  
- 2. Grant of Rights.** I grant MORE the exclusive, royalty-free rights to copyright, publish, broadcast and otherwise disseminate all or any part of the “Recording”, as well as any associated educational materials used or distributed by me at said event. MORE shall have the exclusive, royalty-free rights to use, reproduce, distribute, perform, display, broadcast, exhibit and transmit the Video and Recording, in whole or in part, for any and all uses in connection with the education, research and charitable mission of MORE, whether for commercial or non-profit purposes. MORE shall have the exclusive, royalty free right to use and distribute the “Recording” in any manner and in any media now known or hereafter discovered or developed, so long as such uses are consistent with mission of MORE.
  
- 3. Ownership.** I confirm that, to the best of my knowledge, statements I made or will make in the “Recording” are true and that the “Recording” does not violate or infringe upon the rights of any third party. I represent and agree that I own or control all rights necessary to make the grants of rights contained herein.

I acknowledge and agree that the “Recording” and all right, title and interest in and to the images and material, including all copyright and other intellectual property rights, and all rights in and to the “Recording” and all reproductions, are the sole and exclusive property of MORE. MORE may in its sole discretion protect the copyright and other intellectual property rights relating to the “Recording” and dispose or authorize the use of any and all such rights in any manner whatsoever.

- 4. Release and Indemnity.** I hereby release and indemnify MORE, its employees and representatives, and agents from any and all actions for, from and against all claims, expenses (including attorney fees) or other liability arising from or related to any and all uses of the “Recording”, as well as any broadcast or distribution of the “Recording”, including, without limitation, any claims or actions based on libel or slander or other

defamation, right of privacy, "false light, or right of publicity. I further agree to waive and release all claims for MORE's use of the "Recording". I agree not to assert any claim of any nature whatsoever against anyone relating to the exercise of the permissions granted hereunder. I hereby waive all rights of privacy, publicity or compensation to which I otherwise may have been entitled in connection with the rights granted to MORE herein. I grant to MORE the non-exclusive, royalty-free right to use my name, image, likeness, voice, and biographical information in connection with MORE's use of the "Recording". I also understand and agree that there will be no residual or any other type of payment, royalty, or fee due in connection with use of the "Recording".

I represent that I am at least 18 years of age and am competent to enter into this agreement. I acknowledge that I have read and understood all of the foregoing. I indicate my agreement to the foregoing by my signature below. I understand that a copy of this form will be made available to me upon my request.

**EVENT:** \_\_\_\_\_

**LOCATION:** \_\_\_\_\_ **DATE OF EVENT:** \_\_\_\_\_

**NAME (printed):** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_

**E-MAIL:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_