

***This form must be
printed and
signed by hand***

Get Reel Video Contest

RELEASE FORM

A completed Release Form is required for:

- Each student under 18 who is involved in the production of the submitted video
- Other children under 18 who appear in the submitted video

A parent signature is required on all Release Forms.

Filming/taping on private property requires permission of the property owner. Obtaining this permission is the responsibility of the contest entrants.

Student/Child Name:	<input type="checkbox"/> Student involved in video production <input type="checkbox"/> Child in video (not on production team)
Home Address:	
Phone No.:	Email:
<p>We/I hereby grant the Safe Routes Chagrin program and Chagrin Documentary Film Festival, and their affiliated agencies, the right to:</p> <ul style="list-style-type: none">- Photograph and/or record my person and/or voice on film, video and/or audio tape- Photograph and/or record the person and/or voice of my child or ward on film, video and/or audio tape- Photograph and/or record my property on film, video and/or audio tape, and/or to photograph and/or record on my property- Use a photograph and/or recording produced on film, video, audio/tape by my child or ward. <p>And to distribute, perform or display the same motion pictures, films, still publications, sound recordings, and in all other ways using any descriptive phrases or names in whatsoever manner or media. All such photographs and/or recordings and all rights therein and thereto shall be the exclusive property of the Safe Routes Chagrin program and Chagrin Documentary Film Festival and their affiliated agencies, (Village of Chagrin Falls, Village of South Russell, and the Chagrin Falls Exempted Village School District), and may be used in any manner whatsoever. In granting these rights, we/I understand that we/I hereby release the Safe Routes Chagrin program and Chagrin Documentary Film Festival, and their affiliated agencies and their employees from and all actions, causes of actions, claims and demands except for those arising from the negligence of the Safe Routes Chagrin program and Chagrin Documentary Film Festival, and their affiliated agencies, and their volunteers or employees. We/I further understand that no copies of films or other program elements can be provided by the Safe Routes Chagrin program and Chagrin Documentary Film Festival, and their affiliated agencies.</p>	
Sign here if you are a participant, or the parent of a participant, in the creation of the film, video, audio/tape.	
Student Signature:	X Date:
Parent/Guardian Signature:	X Date:
Parent/Guardian Name:	Email: