

Photo Consent Form

I hereby irrevocably consent to and authorize the use, publication and reproduction in any and all media at any time by the South Dakota FFA Association as well as the West Central FFA or anyone authorized by those entities, of any and all photographs/video taken of me with or without names, as the case may be, for any editorial purpose, promotion, advertising, trade, or other purpose whatever.

I understand that the photographs or videos may be used initially in any or all publications in the promotion of the South Dakota FFA Association and/or the West Central FFA. I realize that this coverage may place my picture with or without further explanation, alone or accompanied by other pictures, in a story, on Web sites/blogs, or on a cover of any or all publicity of the South Dakota FFA Association and/or the West Central FFA Chapter. I hereby release the South Dakota FFA Association and the West Central FFA Chapter, its staff and employees, or anyone it authorizes, from any and all claims whatsoever relating to or arising from the uses consented above.

Further, I so hereby relinquish to the SD FFA and/ or the West Central FFA all rights, title, interest in, and income from the finished sound or silent motion pictures, still pictures, and/or sound recordings, negatives, prints, reproductions and copies of the originals, negatives, recording duplicates and prints, and further grant the SD FFA and/or the West Central FFA the right to give, sell, transfer and/or exhibit the same to any individual, business firm, publication, television station, radio station or network, or governmental agency, or to any of their assignees, without payment or other consideration to me. My agreement to perform under camera, lighting and stated conditions is voluntary and I do hereby waive all personal claims, causes of action, or damages against the SD FFA /West Central FFA office and the employees thereof, arising from a performance or appearance.

I understand this authorization is for the time starting August 1, 2012 thru August 31, 2013.

Date _____

Print Parent/Gardians's Name _____

Parent/Guardian's Signature _____

Print Child's/Children's Names _____

Child's/Children's Signature _____

As West Central FFA chapter advisor I _____ (signature) Authorize the above information to be true.