



Photography/Video/Testimonials Waiver and Release Form

I _____ hereby authorize the Ontario Horticultural Association and its representatives to use the following media type(s) at the event listed below:

Photograph

Video

Recordings of my voice

EVENT: _____ **DATE:** _____

I grant the Ontario Horticultural Association the right as initialed above, to use, publish and display or permit the use, publication and display of audio-visual or digital recordings, negatives, slides, prints or other electronic images or testimonials created by me including all text, names, likenesses, artwork, images, trademarks or trade names at their sole discretion in any publication, media production, display advertisement or internet publication for promoting, publicizing, marketing or explaining the Ontario Horticultural Association and its activities and for administrative and educational purposes as initialed in the boxes above. I agree that the Ontario Horticultural Association may use my name, likeness, or biographical information as I may supply.

I further grant to the Ontario Horticultural Association and its representatives the right to reproduce, use, exhibit, display, broadcast and distribute and create derivative works of these images, recordings, and testimonials in any media now known or later developed, as well as my name for promoting Ontario Horticultural Association and its activities and for administrative and educational purposes. I acknowledge that the Ontario Horticultural Association owns the rights to these materials.

I hereby realize and accept that I am participating on a voluntary basis and will not receive financial compensation from the photographer/videographer/interviewer, from the Ontario Horticultural Association or any firm publishing and/or distributing the finished product.

Waiver, Indemnity and Release:

I hereby waive any right to inspect or approve the use of the images or recordings or any finished product wherein my likeness or my testimony appears. I also waive any right to royalties or other compensation arising from or related to the use of the images, recordings, or materials.

Children under 18 years old must have a parent or legal guardian sign this waiver on their behalf.

Please indicate name of child: _____ **Relationship:** _____

I understand and agree to this release.

DATE: _____

NAME: _____
(Please print)

WITNESS: _____
(Please print)

ADDRESS: _____

ADDRESS: _____

EMAIL: _____

EMAIL: _____

PHONE: _____

PHONE: _____

SIGNATURE: _____

SIGNATURE: _____

Please indicate how you would like to see your photograph credit to appear:

Respecting Your Privacy

The Ontario Horticultural Association, is committed to respecting your privacy. The personal contact information you provide here will not be published without your permission. It may be used to contact you to discuss matters pertaining to the use and reproduction of your media type provided and it may be shared with other OHA employees for this purpose. Any personal information you provide is managed according to the Ontario Personal Information Protection and Electronic Documents Act (PIPEDA).