



NSRMTA Media Release Form:

I, the undersigned, do hereby consent and agree that the NSRMTA, its Executive and its Members have the right to take photographs, videotape, or digital recordings of me on _____ (date) and to use these in any and all media, now or hereafter known for the purpose of communication, advertising and/or promotion. I further consent that my name and identity may be revealed therein or by descriptive text or commentary.

I do hereby release to the NSRMTA and its Executive the rights to exhibit this work in print and electronic form publicly or privately and to market and sell copies. I waive any rights, claims, or interest I may have to control the use of my identity or likeness in whatever media used.

I understand that there will be no financial or other remuneration for recording me, either for initial or subsequent transmission or playback.

I represent that I am at least 18 years of age, or that I have the power to sign this form on behalf of the undersigned individual as his or her legal guardian.

I represent that I have read and understand the foregoing statement, and am competent to execute this agreement.

Individual _____ Date _____

Guardian _____

Address _____

Phone _____

Email _____

Witness for the undersigned _____

Signature _____

Witness Signature _____