



## Videography/Photography Release Form

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This letter confirms the agreement between you and the Pathfinder Ministry of the Ontario Conference of the Seventh-day Adventist Church regarding your participation in this activity to be photographed and/or videotaped (the Property) from time to time.

For valuable consideration received, you hereby irrevocably grant to the Pathfinder Ministry, perpetually, exclusively, and for all media throughout the world (including print, non-theatrical, CD-ROM, internet and any other electronic medium presently in existence or invented in the future), the right to use and incorporate (alone or together with other materials), in whole or in part, photographs or video footages taken of you as a result of your participation in approved activities of the Pathfinder Ministry.

You hereby agree that you will not bring or consent to others bringing claim or action against the Pathfinder Ministry of the Ontario Conference of the Seventh-day Adventist Church on the grounds that anything contained in the Property, or in the advertising and publicity used in connection herewith, is defamatory, reflects adversely on you, violates any other right whatsoever, including, without limitation, rights of privacy and publicity.

You hereby release the Pathfinder Ministry, its directors, officers, successors and assigns from and against any and all claims, demands, actions, causes of action, suits, costs, expenses, liabilities and damages whatsoever that you may hereafter have against the Pathfinder Ministry in connection with the Property.

This agreement shall not obligate the Pathfinder Ministry Program to use the Property or to use any of the rights granted hereunder, or to prepare, produce, exhibit, distribute or exploit the Property. The Pathfinder Ministry shall have the right to assign its rights hereunder, without your consent, in whole or in part, to any person, firm or corporation.

AGREED TO AND ACCEPTED THIS \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Participant's Signature

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Witness

Print Name of Participant: \_\_\_\_\_