

Media Liability Release Form



This letter confirms the agreement between you and the Ontario Conference Pathfinder Ministry (the Ministry) regarding your participation in approved Pathfinder activities, either virtual or in person, in which you may be photographed or videotaped (the Property).

For valuable consideration received, you hereby irrevocably grant to Ontario Conference Pathfinder Ministry, perpetually, exclusively, and for all media throughout the world (including print, non-theatrical, home video, 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 footage taken of you as a result of your participation in approved virtual or in-person activities of the Ministry.

You hereby agree that you will not bring or consent to others bringing claim or action against the Ontario Conference Pathfinder Ministry 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 Ontario Conference Pathfinder Ministry, its directors, officers, online programming committee members, 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 Ministry in connection with the Property.

This agreement shall not obligate the Ontario Conference Pathfinder Ministry to use the Property or to use any of the rights granted hereunder, or to prepare, produce, exhibit, distribute or exploit the Property. The 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

Signature of Parent or Guardian

Witness Signature

Print clearly Name of Participant: _____

Telephone Number: (_____) _____