



NORTH PORT FIRE RESCUE

4980 City Center Blvd.
North Port, FL 34286
Main 941.240.8150
Fax 941.240.8182

NORTH PORT FIRE CADETS PHOTO AND VIDEO RELEASE FORM

Media and Public Relations

By signing this release form, I authorize North Port Fire Rescue, to use the following personal information:

- My picture – including photographic, motion picture, and electronic video images.
- My voice – including sound and video recordings.

I hereby grant to North Port Fire Rescue (NPFR) , its subsidiaries, licensees, successors and assigns, the right to use, publish, and reproduce, for all purposes, my name, picture of me in film or electronic video form, sound or video recordings of my voice, and printed electronic copy of the information described above in any and all media including, without limitations, cable and broadcast television and the internet, and for exhibition, distribution, promotion, advertising, press conferences, social media, meetings, hearings, educational conferences and in brochure and other print media. This permission extends to all languages, medias, formats, and markets now known or hereafter devised. This permission shall continue forever unless I revoke the permission in writing.

I further grant NPFR all rights, title, and interest that I may have in all finished pictures, negatives, reproductions, and copies of the original print, and further grant NPFR the right to give, transfer, and exhibit the print in copies thereof, for marketing, communications, or advertising purposes, as it deems fit. I hereby waive the right to receive any payment for signing this release and waive the right to receive any payment for NPFR's use of any of the material described above for any of the purposes authorized by this release. I also waive any right to inspect or approve finished photographs, audio, video, multimedia, social media, or advertised recordings and copy or printed matter or computer generated scanned image and other electronic media that may be used in conjunction therewith or to approve the eventual use that it might be applied.

I acknowledge that I have read the foregoing and fully understand the contents.

IN WITNESS WHEREOF, I have executed this release on this _____ day of _____, 20_____.

Organization/Entity Name (if applicable): NORTH PORT FIRE RESCUE

Title at organization/entity: NORTH PORT FIRE CADET PROGRAM

Print Name (CADET): _____

Address (CADET): _____

Telephone: _____ Email (CADET): _____

Signature (CADET): _____





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(If release is provided on behalf of a minor)

I hereby certify that I am the parent or guardian of, _____ who is under the age of 18 years, to whom this release applies and that I have the legal authority to execute this release. I approve of the foregoing and agree that we both shall be bound thereby.

PARENT / GUARDIAN NAME

PARENT / GUARDIAN SIGNATURE

