

Arizona Bioindustry Association, Inc.

AZBio 2022 Photo/Video Contest Entry and Release Form

Entry Form: *(required for each photo or video submitted)*

Photographer or Videographer Name: _____

AZBio Member Company Employer: _____

Email: _____ Phone: _____

Photo or Video Title: _____

Where the photo was taken (AZBio Member Company, City): _____

By entering my date of birth, I certify that I am over the age of 18. _____ *DOB*

I hereby grant the Arizona Bioindustry Association, Inc. (AZBio) and /or the Opportunity Through Entrepreneurship Foundation (OTEF) permission to use my likeness, name and the image or video I have photographed or recorded in any and all publications: including, but not limited to, websites, social media posts, advertising and fundraising campaigns, public information campaigns and for other purposes, without payment or any other consideration in perpetuity. I understand and agree that the photo or video I have provided can be used as stated above. My photos can also be used for my personal or professional use. I hereby irrevocably authorize AZBio and/or OTEF to edit, alter, copy, exhibit, publish or distribute this photo for purposes of publicizing AZBio and/or OTEF's programs or for any other lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness, image or video appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photograph. I hereby hold harmless and release and forever discharge AZBio and OTEF from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization. I certify that am 18 years of age or older and am competent to contract in my own name. I have read this release before signing below and I fully understand the contents, meaning, and impact of this release.

Signature of photographer/videographer

Printed Name

Date

Please attach a Permission/Release signed by each person in photo or video on the following page.

Arizona Bioindustry Association, Inc.

Photo/Video Subject Release Form: *(required for each photo or video submitted)*

Photo or Video Title: _____

Photographer/Videographer _____

I hereby grant the Arizona Bioindustry Association, Inc. (AZBio) and/or the Opportunity Through Entrepreneurship Foundation (OTEF) permission to use my likeness and/or name in the image or video described above in any and all publications: including, but not limited to, websites, social media posts, advertising and fundraising campaigns, public information campaigns, and for other purposes, without payment or any other consideration in perpetuity. I understand and agree that the photo or video can be used as stated above. I hereby irrevocably authorize AZBio and/or OTEF to edit, alter, copy, exhibit, publish or distribute this photo for purposes of publicizing AZBio and/or OTEF's programs or for any other lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness, image or video appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photograph. I hereby hold harmless and release and forever discharge AZBio and OTEF from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization. I certify that am 18 years of age or older and am competent to contract in my own name. I have read this release before signing below and I fully understand the contents, meaning, and impact of this release.

Name of Subject	Signature	Date