



# CONNECTICUT WOMEN'S HALL OF FAME

## RELEASE FORM

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I hereby grant to the Connecticut Women's Hall of Fame ("CWHF") permission to use my/my child's name and likeness in a photograph, video, digital representation or other format, and any accompanying narrative (collectively "Submission") in any and all of its presentations and publications, including, but not limited to, at meetings, gatherings, induction ceremonies, on Internet websites, web-based publications, social media postings (including, without limitation, YouTube, Facebook, Instagram, Twitter), or in any other forum, platform or manner whether currently known or hereafter developed, without any payment or other manner of remuneration or other consideration.

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I hereby hold harmless, release, and forever discharge CWHF from any claims, demand, causes of action or liability arising out of use of my/my child's name, likeness, or photograph, and narrative information submitted, including but not limited to any claims for defamation, libel, invasion of privacy, violation of the rights of privacy or publicity, or moral rights that I/my child, or anyone acting on behalf of me/my child have, or may ever have, by reason of this Release.

**I HAVE READ AND UNDERSTAND THE ABOVE RELEASE. I AFFIRM THAT I AM AT LEAST 18 YEARS OF AGE, OR, IF I AM UNDER 18 YEARS OF AGE, I HAVE OBTAINED THE REQUIRED CONSENT OF MY PARENTS/GUARDIANS AS EVIDENCED BY THEIR SIGNATURES BELOW.**

Print Name: \_\_\_\_\_ Child's Name: \_\_\_\_\_

Signature: \_\_\_\_\_ | Date: \_\_ / \_\_ / \_\_\_\_

**If under 18, both parents must sign individually and as parent/guardian.**

Parent Signature: \_\_\_\_\_ | Date: \_\_ / \_\_ / \_\_\_\_

Parent Signature: \_\_\_\_\_ | Date: \_\_ / \_\_ / \_\_\_\_