



AUTHORIZATION/RELEASE

New Hanover County Rabbit Rescue of Wilmington

In consideration of the permission granted to me by New Hanover County Rabbit Rescue of Wilmington to participate and/or have my video, audio, photographic and other copyrighted materials used (hereinafter referred to, collectively, as "My Participation" in the _____ (project/program).

I, _____ hereby release, New Hanover County Rabbit Rescue of Wilmington, the State of North Carolina, the Board Directors, _____ (partner), _____ (partner), _____ (partner) and their officers, employees and agents from all actions, damages or claims which I or my assigns may have against them which may be incurred as a result of my participation in the above described program.

Further, I agree to indemnify and hold harmless New Hanover County Rabbit Rescue of Wilmington, the Board Directors, Board Members, Partners, their officers, employees, and agents from any liability, loss or expenses arising from any claim or litigation that my participation in the program including my statements or actions, or material furnished by me violated or infringed the rights of third parties.

I authorize the use of my name, voice, photograph, likeness, performance and/or biography by New Hanover County Rabbit Rescue, the Board Directors, Partners, and their officers, employees and agents in connection with any use of a product arising out of my participation in the above described program. I authorize New Hanover County Rabbit Rescue to obtain and hold copyrights in such program and products, and to edit my performance and materials in its sole discretion.

I understand that New Hanover County Rabbit Rescue of Wilmington, and/or its partners have no obligation to air the program, and that I will receive no monetary compensation for the rights granted herein. I understand and affirm that this Authorization and Release form shall be considered consent to such use by New Hanover County Rabbit Rescue of Wilmington and/or its partners under the provisions of the North Carolina state statutes.

I, _____ the undersigned am at least 18 years of age or I am the parent or guardian of a participant who is less than 18 years of age. I have read this Authorization and Release form, Waiver of Liability, and understand all of its terms. I execute it voluntarily and with full knowledge of its significance.

Signature of Participant _____ Date _____ Witness _____

Printed Name _____

Signature of Legal Guardian _____ Date _____ Witness _____

Printed Name of Legal Guardian _____