



**CONSENT TO PUBLIC USE OF INFORMATION
REGARDING THE KENASTON & DISTRICT CHAMBER OF COMMERCE**

My signature provides my consent for *(check one or both)*

- Myself My child or dependent _____

to be

- Photographed Filmed and/or video-taped

on _____ **at** _____

and for the visual information obtained to be used for the following purposes

- News or publicity _____

I understand that by signing this I waive any ownership rights to material obtained; and release the Kenaston & District Chamber of Commerce and its employees, officers, members and assignees from all claims, demands, damages or actions or causes of action of any nature whatsoever, arising or to arise from the use of any aforementioned photographs, film/video tapes and or tape recordings.

Dated at the City of _____, in the Province of _____, on the
_____ day of _____, 20_____.

(Signature)

(Signature should be that of subject or, in the case of a minor, the signature of the parent or guardian, unless the minor is emancipated and living separate from the parent/guardian).