

IPSICC PHOTO AND VIDEO RELEASE FORM

I hereby GRANT <u>IPSICC</u> permission to use my likeness in	ı a
Print Full Name	
photograph, video, or other digital media ("photo") in any and all of its publications, inclu-	ding web-based
publications, without payment or other consideration.	
I understand and agree that all photos will become the property of the IPSICC and digital of	copies are
available upon request.	
I hereby irrevocably authorize the <u>IPSICC</u> to edit, alter, copy, exhibit, publish, or distribute	e these photos
for any lawful purpose and according to IPSICC ethical principles (www.IPSICC.org). In	addition, I
waive any right to inspect or approve the finished product wherein my likeness appears. A	dditionally, I
waive any right to royalties or other compensation arising or related to the use of the photo).
I HAVE READ AND UNDERSTAND THE ABOVE PHIOTO RELEASE. I AFFIRM	I AS
EVIDENCED BY MY SIGNATURE BELOW. I ACCEPT:	
Print Name:	
Signature: Date: / / / / / AND DAY	
YR MO DAY	
EXCEPTION CLAUSE	
I hereby DECLINE <u>IPSICC</u> permission to use my likeness in a	
photograph, video, or other digital media ("photo") in any and all of its publications, inclu-	ding web-based
publications, without payment or other consideration BUT agree that my photo and likened by used on colehration night as part of the IPSICC 'mamories' video from the week	ess can ONLY
be used on celebration night as part of the IPSICC 'memories' video from the week.	