



“Dangers of Vaping” PSA Contest 2019
PARENT/GUARDIAN PERMISSION SLIP
OFFICIAL ENTRY FORM

I hereby give my permission, as the parent/legal guardian of the participating student named below to participate in CB Cares Educational Foundation “Dangers of Vaping” PSA Contest. I hereby waive any right that I may have to inspect or approve the finished video product that may be used in connection herein.

The signature below indicates my permission for CB Cares EF to use video footage recorded for (video name) _____ student video, on (date) _____, and in which (student name) _____ ‘s image or voice is recorded.

This video footage may be used for the following purposes:

- Educational presentations
- Video on CB Cares EF’s website and on social media sites for promotional purposes.

There is no time limit on the validity of this release, nor is there any geographic specification of where these materials may be distributed. Student and student’s parent/legal guardian represents and warrants that the video created for submission to the CB Cares EF “Dangers of Vaping” PSA Contest is original and does not infringe upon the copyright, trademark, patent or other intellectual property rights of any third party. If the video created for submission to CB Cares EF “Dangers of Vaping” PSA Contest becomes the subject of a claim, suit, or allegation of copyright, trademark, or patent infringement, CB Cares EF shall have the right, in its sole discretion, to reject or otherwise disqualify the submission. Teacher, student, and student’s parent/legal guardian agree to indemnify and hold harmless CB Cares Educational Foundation, its officers, employees, and agents from and against any and all claims, actions, costs, judgments, or damages of any type relating to the production or distribution of the video submitted to the CB Cares EF “Dangers of Vaping” PSA Contest.

I have retained a copy of this release form.

Student (please print name): _____

Student Signature: _____ Date: _____

Parent/Legal Guardian (please print name): _____

Parent/Legal Guardian Signature: _____

Date: _____