

The New York Public Library

CONSENT/RELEASE (ADULT)

Form 3 <u>INSTRUCTIONS</u>: THIS CONSENT/RELEASE MUST BE SIGNED BY ADULTS WHO ARE PHOTGRAPHED, FILMED, INTERVIEWED OR OTHERWISE RECORDED BY THE LIBRARY. WHEN ADULTS WANT TO PARTICIPATE IN LIBRARY-SPONSORED ACTIVITIES, THEY MUST ALSO SIGN THIS CONSENT RELEASE.

In consideration of my participation in the program (the "Program") at The New York Public Library ("the Library"), I hereby consent to allow the Library and its agents to photograph, film, or videotape me, and to use the photographs, digital reproductions, films, or videotapes with or without my name, and to quote or record statements from me for any purpose of the Library, including, but not limited to, exhibitions, research, publications, educational, archival, fundraising, and public relations purposes, as well as for informational programming and notices regarding the Program.
I grant the Library, its agents and licensees all rights to reproduce, edit, mix, distribute, and display publicly, including on the Internet, photographs, film, videotape, and statements, and to prepare derivative works based on the foregoing. I understand that this consent is perpetual, that I may not revoke it, and that it is binding on me, my heirs, legal representatives and assigns.
I expressly waive, release, and discharge the Library (including its Trustees, officers, employees, agents, and volunteers) and the City of New York from all claims, causes of actions, and demands that I may have against them arising from my participation in the Program or distribution of my name, likeness, or statement. The Library has no financial commitment to me as a result of this consent and release.
This document contains a release of claims. Please read it carefully before signing. I acknowledge that I have received, read, understood and agreed to the above and I voluntarily sign this consent and release.
Full Name:
Signature:
Date Phone Number:

NOTE TO NYPL STAFF MEMBER: PLEASE SEND A COPY OF THIS RELEASE TO NYPL'S RIGHTS CLEARANCE ANALYST -- GREG CRAM AT GREGCRAM@NYPL.ORG

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Event and Media Consent Form

Student Name:	School:
CONSENT TO ATTEND MOUSE E	EVENT, TRAINING, FIELDTRIP OR CONFERENCE
My son/daughter has permission to attend t	the Mouse Event on (date/s).
Parent/Guardian (if Student is under 18):	Date:
OR	
Signature of Student (if 18 or over):	Date:
	.M, OR VIDEOTAPE A STUDENT FOR NON-PROFIT US
 videos of the Student named above Consent to organizations working we media representatives, those who a Parties") also interviewing and takin Grant to Mouse and the Other Partimovies and videos of the Student, at the edited forms thereof for any and print, on the Internet, and in all other Release Mouse and the Other Partimovies 	with or on behalf of Mouse, which may include Mouse partners, attend Mouse related functions and others (collectively, "Other ng quotes, photographs, movies and videos of the Student ies, the right to edit such interviews, quotes, photographs, and to copy, display, distribute, use and reuse the original and d all non-profit purposes including, but not limited to, use in er forms of media, whether existing now or later created ties and their respective agents, directors, officers, staff and , demands, losses, damages, suits and liabilities of any kind
Signature of:	
Parent/Guardian (if Student is under 18):	Date:
Address of Parent/Guardian:	
OR	
Signature of Student (if 18 or over):	Date:
Address of Student:	
Check here if you do not give consent to	o photograph, film or videotape for non-profit use.