## JD SHETH FOUNDATION MEDIA RELEASE FORM

## Participant Name: \_

For the opportunity to participate in mission trips/work, volunteerism, and/or any organized dealings with the JD Sheth Foundation, I agree that the videos, audios, photos, written word, biographical materials, and/or any media obtained while participating in mission trips/work, volunteerism, and/or any dealing with the JD Sheth Foundation, may be used without limitation through any means and I shall not receive any compensation for my participation or use of these materials.

I confirm and authorize that any and all material furnished by me or taken of me throughout the process of missionary trips/work, volunteerism, and/or any dealing with the JD Sheth Foundation, may be used without obligation to me or any third party. I grant the JD Sheth Foundation the irrevocable and unrestricted right of use of my name, likeness, image(s), voice, audio, written word, and biographical material produced via my participation in any and all mission trips, volunteerism, and/or any dealing with the JD Sheth Foundation. The JD Sheth Foundation may exhibit, advertise, promote, alter and/or edit, and otherwise use these said materials thereof in any medium whether I am identifiable or unidentifiable. I understand that the JD Sheth Foundation has the right to use the materials in any way he/she chooses, and I have no right to inspect or approve those materials.

I further agree that my participation in the mission trip/work, volunteerism, and/or any dealings with the JD Sheth Foundation confers upon me no rights of use, ownership, or copyright of materials obtained by this nonprofit organization. I understand that all materials produced in association with my participation become property of the JD Sheth Foundation. I release the JD Sheth Foundation, their board of directors, individuals assisting with mission trips, volunteerism, and/or any dealings with the JD Sheth Foundation, agents, and/or third parties associated, from any and all liability which may arise from the use of these materials.

l,	_, (Participant) agree to and sign this on the
(MM/DD/YEAR) for	(Project) located
in	
Address:	
Phone Number:	
Date of Birth:	
Emergency Contact & Phone Number:	
Participant Signature:	

## If participant is a minor (under the age of 18), the signature of a parent or legal guardian is required.

l,	
guardian of	(Participant), and I am in agreement with the terms
set forth in this Media Release Agreement on this	(MM/DD/YEAR) for
(Project) lo	ocated in
Address:	
Phone Number:	
Participant's Date of Birth:	
Emergency Contact & Phone Number:	
Parent/Guardian Signature:	