

# NW EEO/Affirmative Action Association Photo and Information Release

I hereby grant NW EEO/Affirmative Action Association (“NW EEO”) permission to use any and all of the following in any and all of its publications, including website entries, without payment or any other consideration: my first name; the name of the high school I attended; the name of the college I will be attending; my likeness in a photograph; and any other information included in my application for NW EEO’s scholarship. I understand that NW EEO will not publish or disclose to any third parties my last name, address and phone number, and/or financial information.

I understand and agree that any photographs submitted or taken will become the property of NW EEO and will not be returned.

I hereby irrevocably authorize NW EEO to edit, alter, copy, exhibit, publish or distribute photos for the purposes of publicizing NW EEO’s programs and for any other lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of my first name and or/ my likeness.

I hereby hold harmless and release and forever discharge NW EEO from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

I am 21 years of age and am competent to contract in my own name. I have read this release before signing below and I fully understand the contents, meaning, and impact of this release.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Printed Name)

If the person signing is under age 21, there must be consent by a parent or guardian, as follows:  
I hereby certify that I am the parent or guardian of \_\_\_\_\_, named above, and do hereby give my consent without reservation to the foregoing on behalf of this person.

\_\_\_\_\_  
(Parent/Guardian’s Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Parent/Guardian’s Printed Name)