



Print Photographer's Name: _____

All the World in New York City Photography Competition
Exhibition at *DNA Learning Center NYC* at City Tech

PHOTO/VIDEO RELEASE FORM

I understand that I and/or my minor child appear in a photograph or photographs taken by Photographer ("Images") that will be submitted to Cold Spring Harbor Laboratory as an entry in its *All the World in New York City* Photography Competition ("Competition"). I have been informed that Cold Spring Harbor Laboratory may, but is not obligated to, use and display the Images along with my and/or my minor child's name, hometown, and attributed quotes in a print or electronic publication, brochure, exhibit, web/internet site, or other media as part of the Competition.

I hereby authorize Cold Spring Harbor Laboratory and its affiliates and their representatives, employees, officers, trustees and agents (collectively, "CSHL") and those acting pursuant to its authority to use, publish and display the Images in connection with the Competition and CSHL's promotion thereof, including in CSHL's publications, promotional materials, and/or websites. I hereby release CSHL and those acting pursuant to its authority from liability for any violation of any personal or proprietary right that I or my minor child may have in connection with such use.

I hereby waive any right to inspect and/or approve the exhibit, printed materials or websites where the Images are used. I further acknowledge and consent that my and/or my minor child's name and identity may be revealed therein or by descriptive text or commentary.

I waive any right to compensation for my or my minor child's appearance in the Images or in CSHL's printed documents or websites and any and all future uses of the Images by CSHL.

I have read and fully understand the terms of this release.

If model in the Images is 18 years of age or older, sign on own behalf:

***Print Name:** _____

***Signature:** _____ ***Date:** _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

If model is under 18 years of age, parent/guardian MUST complete:

I am a **parent/guardian** of the below minor, and I hereby agree that such minor and I will be bound by all the above terms.

***Print Child's Name:** _____

***Parent's Signature:** _____ **Date:** _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____