

Technology for Independent Living (TIL)

Provincial Respiratory Outreach Program (PROP)

## Unit 103, 366 East Kent Avenue South, Vancouver BC, V5X 4N6, [www.technologyforliving.org](http://www.technologyforliving.org), (604) 326-0175

**Simon Cox Student Design Competition Consent & Release Form**

## Promotional Material Release Consent

This release is to be signed by all people whose stories and/or images TECHNOLOGY FOR LIVING proposes to use in our publication, online videos, social media or any other media.

##

I, do for myself, my heirs, executors, administrators, predecessors, successors, agents and assigns, does hereby grant, release and forever discharge and agree to save harmless the TECHNOLOGY FOR LIVING, its officers, directors, employees, agents, servants, predecessors, successors, assigns, and related or associated companies, the authority, permission, and agreement:

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b) in the event that TECHNOLOGY FOR LIVING is unable to contact me, I hereby relinquish my right to examine or approve the completed product or products or printed matter or image for publication for distribution by any means or media including the internet without restrictions.

c) I hereby release, discharge, and agree to save harmless TECHNOLOGY FOR LIVING, from any fee, royalty, or liability associated with the use of my image or article of and about me including without limitation any claims for libel or invasion of privacy.

## Intellectual Property Release Consent

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ agree to allow Technology for Living to use the design, project, or idea for use with Technology for Living members only. Upon request from Technology for Living, I agree to make available, to Technology for Living, the design and or intellect involved in the project. Aside from using the design, project, or idea with Technology for Living members, Technology for Living will not resell, profit from, or in any other way benefit from using the design or intellect provided by myself and my team. I also understand that the intellectual property of the project or product does not belong to TECHNOLOGY FOR LIVING.

**I have read the above authorization, release and agreement, prior to its execution; I fully understand the contents thereof. This consent is valid until Technology for Living receives written notification revoking this release.**

Signature Date

Address

 ( )

City, Prov Telephone

Email

If this release is obtained from a presenter under the age of 19 or a person with disabilities unable to sign, then the signature of that presenter’s parent or legal guardian/representative is also required.

Legal Representative Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_