

Virtual Event Panelist Release Form

Event Name

Event Date

Panelist Full Name

Email Address

Organization

Release Agreement

I hereby grant permission to the organizers of the event listed above to record, photograph, stream, distribute, and use my voice, image, likeness, and/or presentation, in whole or in part, in any and all media formats for purposes related to the event.

I understand that this release is granted without compensation and that I waive any right to inspect or approve the final use.

I confirm that my presentation and materials do not infringe upon the rights of others and I have obtained any and all necessary permissions for any third-party materials included.

Panelist Signature

Date Signed