## **Event Photography Media Waiver and Liability Form**

| Event Name   |
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|  |
| Event Date   |
| L Verit Date   |
|  |
| Participant Full Name  |
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| Email Address  |
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|  |
| Phone Number   |
|  |
| Media Release Consent  |
| I hereby grant permission to the event organizers to photograph and/or record me at this event. I understand and agree that the photos and/or videos may be used for promotional and marketing materials without compensation.                     |
| Liability Waiver   |
| I hereby release and hold harmless the event organizers, their representatives, and affiliates from any and all liability or claims associated with my participation in this event, including the use of my image or likeness in any media format. |
| Signature  |
|  |
| Date Signed  |
|  |