

## **Image Release and Parent/Guardian Consent Form**

Student Name & School		
Student Email Address		
Student Age (as of 1/8/18):	Grade in School:	
Parent/Guardian Name		
Street Address		
City	State	Zip
Phone	Parent Email Address	

## **Disclaimer and Signature**

I give permission for the Mavericks Film Festival, Mavs News, and Norwood Public Schools to use still images and /or video clips of myself and my film for the following applications: to display on the internet, including the school website, YouTube channel, public relations and press materials, advertisements and print material. I hereby certify that I have obtained all necessary & required legal clearances for all contents of my film, including but not limited to images, writing, script, talent, music and any other content. I agree to hold the Mavericks Film Festival, Mavs News, and Norwood Public Schools harmless from any and all liability for any alleged violations of copyright or any other laws and rights. I certify that I have complete authorization to submit my film for the Mavericks Film Festival.

Festival.	
Student Signature:	Date:
If the student is under 18 years of age, Parent/Guardian signature is required. I hereby grant my permission for my son/daughter to participate in the 2018 Mavericks Student Film Festival and agree to the rules and conditions of the Festival, as stated above. I will hold the Mavericks Film Festival, Mavs News, and Norwood Public Schools harmless from any and all suits and liabilities arising from any alleged or actual violations of copyright or other rights, or loss of programs submitted.	
Parent/Guardian Signature:	Date:

Thank you for your interest in the 1<sup>st</sup> Annual Mavericks Film Festival! Please return your completed and signed form to the Norwood Public School office or mail to Norwood Public Schools – Attn: Film Festival, PO Box 448, Norwood, CO 81423 or email it to filmfestival@norwoodk12.org.

Mavericks Film Festival Norwood Public Schools