



the Jane Goodall Institute

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Model Release

In consideration of myself, (my child or my ward), as a model, upon the terms herewith stated, I hereby grant to the Jane Goodall Institute and its staff, legal representatives, and affiliates:

- a) the irrevocable and unrestricted right and permission to copyright in its name and distribute, use, re-use, publish, and republish photographs and audio and video recordings of myself, (my child or my ward), now or hereafter known for illustration, art, promotion, advertising, trade, or any other purpose whatsoever.
- b) I hereby relinquish any right that I may have to examine or approve the completed product or products or the advertising copy or printed matter that may be used in conjunction therewith or the use to which it may be applied.
- d) I hereby release, discharge and agree to save harmless the Jane Goodall Institute and its staff, legal representatives, and affiliates from any claims for libel or invasion of privacy.
- e) I understand that no compensation will be forthcoming.
- f) I understand that the Jane Goodall Institute has the right to use my (my child's or my ward's) name in conjunction with any photograph or recording of me (my child or my ward).
- g) I understand that this a blanket model release that is binding for any and all photographs and recordings taken by or submitted to the Jane Goodall Institute, now and hereafter known.
- h) I hereby affirm that I am over the age of majority and have the right to contract in my own name (the name of my child or ward). I affirm that I am the parent or legal guardian of my child or ward. I have read the above authorization, release and agreement, prior to its execution; I fully understand the contents thereof. This agreement shall be legally binding upon me (my child or my ward) and my legal representatives .

Dated: _____
Name (printed): _____ (signed): _____
Address: _____ City: _____
State/Zip: _____ Country: _____
Phone: _____ E-mail: _____
Witness: _____

If signing for child or ward if under the age of 18:

Dated: _____
Minor's Name: _____
Parent or Guardian Name (printed): _____
Parent or Guardian Name (signed): _____

Please return JGI Communications Department
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