

2020 OREGON WORLD WATER DAY PHOTO CONTEST RELEASE FORM

Please fill out one form for each photo you submit.

| ENTRY INFORMATION | |
|---------------------|------------------------|
| Name: | Photo Location: |
| Address: | Email: |
| City/State: | Phone No: |
| Photo Title: | |

Please describe what your connection is to the Oregon waterway pictured:

Each photo must be submitted with this entry form which includes a publicity release/permission to reprint photos. Please email this form and image to photos@cityofsalem.net by 5pm March 23, 2020. This contest is open to the general public. All photos must be taken of an Oregon waterway. All accepted photos may be used in various media formats for an unlimited amount of time and at no cost to City of Salem Staff. Photo credit is not guaranteed for all uses of image.

| PUBLICITY RELEASE/PERMISSION TO REPRINT | |
|---|--------------|
| By typing my name below, I hereby grant the City of Salem the right to use this photo entry for publishing, illustration, advertising, trade and promotion, or any other use in any medium for any purpose. I hold the City of Salem harmless from any and all liability that might arise out of or result from the foregoing use. My entry signifies that I will abide by all rules, including that I will provide my true signature if my photo is selected. | |
| Signature: | Date: |
| <i>If photographer is under 18, this form MUST be signed by a parent or legal guardian.</i> | |
| Parental Signature: | Date: |
| MODEL RELEASE | |
| By typing my name below, I hereby signify that I have permission from any and all models in my photograph submission to be included in this contest and I hereby grant the City of Salem the right to use my likeness or the likeness of any person featured in the photograph in any and all of its publications, including website entries, without payment or any other consideration. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photograph. I hereby hold harmless and release and forever discharge the City of Salem from all claims, demands, and causes of action which, I, my heirs, representatives, executors, administrators or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization. | |
| Signature: | Date: |
| <i>If model is under 18, this form MUST be signed by a parent or legal guardian.</i> | |
| Parental Signature: | Date: |