

Alpine Adventures 2015/2016

Photograph and Electronic Image Release and Consent Agreement

Participants Name _____ Birth Date _____

Participants Full Legal Name _____

Phone (Hm.) _____ (Day) _____

Street _____

City _____ State _____ Zip _____

If a minor, parent's full legal name _____

I hereby consent to the use of my photographic image by Alpine Adventures in promotional and informational material, email and Internet, and electronic media. I further agree that Alpine Adventures is free to select any photographs or electronic images without consultation with me.

I understand that I am donating the photograph(s) or electronic image(s) and that there will be no payment or compensation for the photograph(s) or electronic image(s) or for its use. In giving my consent, I agree that I shall not bring or file any complaints, claims, or causes of action of any kind against Alpine Adventures for any matter in connection with the use of my photograph(s) or electronic image(s).

I have carefully read this Photograph and Electronic Image Release and Consent Agreement and understand it fully. I understand and am aware that this is a binding legal contract that completely releases Alpine Adventures from any liability or any claims which I may ever have. I understand that if any part of this agreement is held unenforceable that the remainder will stay in effect. I agree that this agreement will be interpreted pursuant to California Law.

Signature of Participant

Date

I verify that I am the parent/guardian of this minor participant and I have the authority to enter into this agreement on behalf of this minor and agree on behalf of myself and any other parent/guardian to all of the above terms and conditions of this Photograph and Electronic Image Release and Consent Agreement

Signature of Parent/Guardian

Date