

Speak Out to Save Lives! Public Service Awareness Video Contest 2020-2021 School Year



FBI Pittsburgh H.O.P.E. (Heroin Outreach Prevention and Education) Initiative SUBMISSION PARENT/GUARDIAN AUTHORIZATION AND RELEASE

CHILD'S NAME

PARENT'S/ LEGAL GUARDIAN'S NAME

As parent and/or legal guardian of the child named above (the "Child"), I authorize my Child's participation in the FBI Pittsburgh HOPE <u>Speak Out to Save Lives!!- Public Service Awareness (PSA)</u> <u>Contest (the "Contest")</u>. For good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, on my own and my Child's behalf, I grant the FBI Pittsburgh Field Office, FBI Pittsburgh CAAA, licensees and its H.O.P. E. Initiative Partners, assigns and successors in interest a worldwide, perpetual, irrevocable license to use, license to others to use, reproduce, edit, prepare derivative works, publish, broadcast, distribute copies to the public, and perform and display publicly in any manner and for any purpose the video created and submitted by or on behalf of my Child for the Contest (the "Submission"). I further authorize the FBI Pittsburgh Field Office, FBI Pittsburgh CAAA, licensees and its H.O.P. E. Initiative Partners to use the Child's name, likeness, school name, grade level, or other biographic information provided in connection with the Submission.

On my own and my Child's behalf, I certify that the Submission is the Child's original work, to the best of my knowledge, and I have the authority to assign these rights to the Submission and content contained therein. I understand the Submission will not be returned, and FBI Pittsburgh, FBI Pittsburgh CAAA, and

Page 1 of 2 (Speak Out to Save Lives Submission Parent/Guardian Authorization Release)

its partners in the H.O.P.E. Initiative have no obligation to use the Submission.

I release and discharge FBI Pittsburgh, FBI Pittsburgh CAAA, and its partners in the H.O.P.E. Initiative, its employees, officers, directors, volunteers, licensees, designees, successors and assigns from any and all claims, actions and demands arising out of or relating to use of the Submission. I acknowledge that neither I nor my Child expect remuneration or compensation from FBI Pittsburgh, FBI Pittsburgh CAAA, and its partners in the H.O.P.E. Initiative, or any person or entity for the right and permission to use the Submission, as I grant such right and permission because of my desire to help FBI Pittsburgh, FBI Pittsburgh CAAA, and its partners in the H.O.P.E. Initiative in its mission to help raise awareness in the fight against the heroin epidemic.

I represent my Child and I have the right and authority to enter into this Authorization and Release and that the rights granted herein will not conflict with or violate any commitment or understanding I have with any other person or entity, and have read this document and fully understand its content.

ACKNOWLEDGED AND AGREED on the date set forth below:

Signature:		Date:	
Relationship to Child:			
Phone:	Email:		
Yes, my child and I	have read, and will abide l	oy the Official Rules and Regulations	for this

contest.

Sponsor/Group Information:

School Name/Teacher Sponsor Name:

Page 2 of 2 (Speak Out to Save Lives Submission Parent/Guardian Authorization Release)