

BERKSHIRE COUNTY VOLLEYBALL CLUB

Video and Photo Release Form

This letter confirms the agreement between you and Berkshire County Volleyball Club (BCVBC) regarding your participation in approved activities in which you may be videotaped or photographed occasionally. For valuable consideration received, you hereby irrevocably grant to Berkshire County VBC perpetually, exclusively, and for all media (including print, nontheatrical, home video, CD-ROM, internet and any other electronic medium presently in existence or invented in the future), the right to use and incorporate (alone or together with other materials), in whole or in part, photographs or video footage taken of you as a result of your participation in approved activities of Berkshire County VBC. You hereby agree that you will not bring or consent to others bringing claim or action against Berkshire County VBC on the grounds that anything contained in the Property, or in the advertising and publicity used in connection herewith, is defamatory, reflects adversely on you, violates any other right whatsoever, including, without limitation, rights of privacy and publicity. You hereby release Berkshire County VBC, its directors, and officers from and against any and all claims, demands, actions, causes of actions, suits, costs, expenses, liabilities, and damages whatsoever that you may hereafter have against Berkshire County VBC. This agreement shall not obligate Berkshire County VBC to use the Property or to use any of the rights granted hereunder, or to prepare, produce, exhibit, distribute or exploit the Property. Berkshire County VBC shall have the right to assign its rights hereunder, without your consent, in whole or in part, to any person, firm or corporation.

I understand that these pictures will be accessible to anyone with Internet access and may be used in instructional settings; however, no names of subjects will be published.

AGREED TO AND ACCEPTED on this date _____

Participant's Name - Please Print _____

Parent/Guardian Name - Please Print _____

Signature of Parent or Guardian _____