



*With Spirit and Strength*

### CONSENT TO USE MEDIA

This document confirms the agreement between you and the Aleutian Pribilof Islands Association, Inc. (APIA) regarding your participation in a video or videos (Property) you have provided for the “Pass the Brush” video project. By granting your approval through this agreement, APIA will use your personal video (Property) previously submitted to the “Pass the Brush” video project (or a new video which you created for APIA) along with videos of others who grant APIA consent, to create an Unangax̂ version that may be posted on APIA’s website, APIA’s Facebook page, YouTube account, Vimeo account, the Aleut-L distribution list, and may be shared at the Aleut Villages Conference, Unangax̂ region meetings or venues, and other events or venues.

You hereby agree that you will not bring or consent to others bringing claim or action against APIA on the grounds that anything contained in the Property, or in the advertising or 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 APIA, its directors, officers, employees, successors and assigns 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 APIA in connection with the Property. This agreement shall not obligate APIA to use the Property or to use any of the rights granted hereunder, or to prepare, produce, exhibit, distribute or exploit the Property.

I, \_\_\_\_\_, (please print your name) grant permission and give my consent to the Aleutian Pribilof Islands Association, Inc. (APIA) to use photographs and/or videos of myself, to create the Unangax̂ version of “Pass the Brush” and to post and share on APIA’s website, APIA’s Facebook Page, Vimeo Account, YouTube account, or other similar video accounts, Aleut-L, the Aleut Villages Conference, Unangax̂ region meeting or venues, and other events or venues.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

Address: \_\_\_\_\_ City, State Zip: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**Parental Consent:** If you are under 18 years of age, you must have your parent or legal guardian sign this form.

\_\_\_\_\_  
NAME OF PARENT/GUARDIAN

\_\_\_\_\_  
SIGNATURE OF PARENT/GUARDIAN