



## Video Consent Form-P1

**Name**

First Name

Last Name

**Phone Number**

**Email Address**

**Company / Organization**

**Address**

Street Address

Street Address Line 2

City

State / Province

Postal / Zip Code

Country



## Video Consent Form-P2

### Video Title/Content/Description

### Purpose of Use of Video

I hereby declare that I am the original owner of the video and I represent and warrant that: I grant the use, distribution, display, and reproduction of the video royalty-free and authority to use the video and all words and phrases mentioned therein for educational purposes. I grant to the distribution of the images and the video including the subjects, in print, electronic, including video formats capable for viewing through electronic devices. I hereby waive my right to inspect and/or approve the video for which it may be applied or modified. I release, discharge, and hold harmless the recipient, IMX Media, of the video against any and all claims that I may have arising from or in connection with my participation in the said video.

**Print Signature**

**Date Signed**