



The Association for
Frontotemporal Degeneration
Opening the gateway to help and a cure

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Media Release Form with Children

I hereby grant permission for the Association for Frontotemporal Degeneration (AFTD) to use any photographs of myself and/or the minor child or children listed below, and our names and likenesses, in any electronic and print communications and publications, including but not limited to AFTD's website, should they choose to do so. AFTD shall have all rights, titles, and interests to the videotape or filmed footage or photographs, or any written, creative or other work that we submit to the organization. AFTD may edit this footage and/or still photographs, written, or creative work that embody my image, name, likeness as it sees fit.

Recognizing that AFTD will take care to use what I send in a responsible manner, I hereby release and hold harmless AFTD from any reasonable expectation of privacy or confidentiality for myself and for the minor child and children listed below associated with the images. I further acknowledge that my participation, and that of the minor child and children listed below, is voluntary and that we will not receive financial compensation of any type associated with the taking or publication of these items or participation in the organization's marketing materials or other AFTD publications.

I hereby release AFTD, its contractors, its employees, and any third parties involved in the creation or publication of educational or marketing materials, from liability for any claims by me or any third party in connection with my participation and that of the minor child and minor children listed below.

Further, I attest that I am the parent or legal guardian of the child or children listed below and that I have full authority to consent and authorize AFTD to use their creative products, their likenesses and name.

I hereby acknowledge that I have read and understand AFTD's media release form.

Signature: _____ Date: _____

Print Name: _____ Relationship to Children: _____

Names and Ages of Minor Children:

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____