



Parkinson's Nebraska Release Form

I, _____, the undersigned, give my permission to Parkinson's Nebraska, located at 16811 Burdette Street, Omaha, NE, the perpetual, royalty-free right to:

- Record my participation and appearance in print or on digital or film photography, videotape or audiotape, or any other medium at the event, publication or promotion.
- Use my name, likeness, written words, voice and biographical material in connection with promoting and/or raising funds for the organization via an event/publication/promotion.
- Reproduce, distribute, publicly display and/or publicly perform in print, electronic or any other medium of the aforementioned event/publication/promotion.

I make this permission voluntarily, and further agree to release and forever discharge Parkinson's Nebraska, its agents, employees and designed representatives from any and all claims in law or equity that I, my heirs or personal representative have or shall have arising from the Parkinson's Nebraska event/publication/promotion.

Participant's/Guardian's Signature (If guardian, relationship)

Address Phone Number

Email