



MULTIMEDIA/STUDENT RELEASE

DESCRIPTION OF MULTIMEDIA: Photographs and/or video taken during the course of the ***After School Leaders Program*** and related activities.

I hereby irrevocably consent to and authorize the use, by THE GOVERNMENT OF MANITOBA, or anyone that it may authorize, of the interview(s), photograph(s), or film(s), or any other new media or format and any reproductions thereof, that The After School Leaders Program has taken of me or of the minor(s) named

_____ in which I or the minor(s) appears, for the following purposes and without the payment of any compensation therefore:

(a) for publication, display and exhibition thereof for articles, promotions, and advertising, including in the form of audio visual presentations, television, radio, illustrations and posters, video, internet or any other new media or format.

(b) for loan to other governments, either federal, provincial or municipal, for promotions pertaining to the industries, peoples, places and attractions of the Province of Manitoba; and

(c) for loan to the media and to individuals, firms, businesses and organizations for approved promotional activities pertaining to the Province of Manitoba.

AND I agree and understand that such interview(s), photograph(s) or film(s), or any other new media or format, or any original material including the negatives thereof and all copyright therein, are and shall always be the sole property of The Government of Manitoba, and that The Government of Manitoba does not intend to sell, or derive any direct financial gain from, such interview(s), photograph(s) or film(s).

I HEREBY represent that I am over 18 years of age and have the right to contract in my own name and for the above-named minor(s), and also state that I have read this document prior to signing same and that I fully understand its contents.

DATE: _____ PRINT NAME IN FULL: _____

ADDRESS _____

WITNESS: _____ SIGNATURE: _____

I REPRESENT that I am the parent or guardian of the above-named minor(s) and I hereby consent to the foregoing on his/her/their behalf.

DATE: _____ WITNESS: _____

SIGNATURE OF PARENT/GUARDIAN: _____