

## **CONSENT AND RELEASE FORM**

Ι,					
,	(Please Print - First Name	/Last Name of Photo Subject)			
of					
	(Address)				
	(City/Town)	(Province)	(Postal Code)		
for aoo	d and valuable consideration, the rec	,	cknowledge:		
a)	give to the UFA Agricultural Cor employees, agents, affiliates and t "Content") in any written/electronic	nmunity Foundation, United Fi hose authorized by them (colle	Farmers of Alberta Co-operative ectively, "UFA"), the right to use	my photographic likeness (the	
b)	give to UFA the perpetual, irrevocable and non-exclusive right, without any further payment to me, to use, publish, reproduce transmit throughout the world, in any form or medium, my name, likeness and words spoken or written, and I hereby release UFA from any and all future claims arising from the use or misuse of Content whatsoever and howsoever arising;				
c)	agree that I have no rights to any content or media produced by UFA using the Content and that the Content may be combined with other media, images and graphics and may be modified by UFA, in its sole discretion acting reasonably;				
d)	warrant that my likeness and words are made truthfully and without coercion and that they will not violate the rights of any person and				
e)	agree that this consent and release form will be governed by the laws of the Province of Alberta.				
SIGNE	D AND DATED this day	of, 20			
Please	complete and sign the appropriate se	ection below, based on the age	of the Photo Subject		
If the P	Photo Subject is an Adult:				
Signatu	ure of Photo Subject	Witness to Sigr	nature of Photo Subject	_	
		Print Name of	Witness	_	
If the P	Photo Subject is a Minor in the Prov	vince of Residence:			
Signa	ture of Parent/Guardian of Photo Sub	oject Witness to Sig	gnature of Parent/Guardian		
Print Name of Parent/Guardian		 Print Name of	Witness		