



IMPACT STORY PHOTO RELEASE AND CONSENT AGREEMENT FORM

The undersigned, hereafter known as **“the individual”**, agrees and consents to their photo being used by the **American Kennel Club Canine Health Foundation, Inc** a 501(c)3 charitable organization, with its principal offices at 8051 Arco Corporate Drive, Raleigh, NC 27617, telephone number 919-334-4010, hereafter known as **“CHF”**. The Individual will allow CHF to utilize only image(s) listed below for use in the instances indicated below to further its mission to advance the health of all dogs and their owners by funding scientific research and supporting the dissemination of health information to prevent, treat, and cure canine disease.

CHF IS RELEASED OF LIABILITY: For good and valuable consideration herein acknowledged as received, the Individual releases CHF and assigns permission to license only the image(s) listed below and use of the image(s) only in the publication(s) indicated below. The Individual agrees that any images may be combined with other images, text and graphics, cropped, altered and modified.

CHF RETAINS ALL RIGHTS: The Individual agrees that CHF has all rights to images, only for the aforementioned publication(s). The Individual acknowledges and agrees that CHF is not liable for any further consideration or accounting, and further claims for any reason.

DURATION OF AGREEMENT: The Individual acknowledges and agrees that this Agreement is binding on all heirs and assigns. The Individual acknowledges and agrees that this Agreement is irrevocable, worldwide and perpetual, and will be governed by the laws of the State of North Carolina, excluding the law of conflicts.

This Agreement contains the entire agreement between the parties to this release and the terms of this Agreement are contractual and not a mere recital. This Agreement will be construed in accordance with and governed by the laws of the State of North Carolina.

Photographs may be used for the following: Annual Report, Research Grants Portfolio, CHF Website, Newsletter, CHF emails, and/or any CHF marketing and fundraising.

Photo I:

Name / Description of photo _____

Dog Breed / Name _____

Name of person(s) in photo (if applicable) _____

Photo credit attributed to: _____



AMERICAN KENNEL CLUB®
**CANINE HEALTH
FOUNDATION**®
PREVENT TREAT & CURE®

Photo II:

Name / Description of photo _____

Dog Breed / Name _____

Name of person(s) in photo (if applicable) _____

Photo credit attributed to: _____

Photo III:

Name / Description of photo _____

Dog Breed / Name _____

Name of person (s) in photo (if applicable) _____

Photo credit attributed to: _____

Photo attribution will be included in the publication if requested, and as indicated by the Individual.

Sign here:

Individual name (please print) _____

Signature _____ Date _____

IF THE INDIVIDUAL IS UNDER THE LEGAL AGE OF MAJORITY: I am the parent or legal guardian of the minor above named as the Individual, and I have legal authority to execute this Agreement on the Individual's behalf. I have read and fully understood the contents of this Agreement, and consent to the said use of images and/or sound/video recordings based on the contents of this Agreement.

Parent/Guardian (please print) _____

Signature _____ Date _____