

# KAPPA ALPHA PSI FRATERNITY GUIDE RIGHT/ KAPPA LEAGUE ACTIVITIES

## CONSENT, AUTHORIZATION AND RELEASE MEDIA, VIDEO, SOUND RECORDINGS AND PHOTOGRAPHS

As parent or guardian of \_\_\_\_\_ (print name), I, as indicated by my signature below, hereby expressly grant permission to the **Riverside Alumni Chapter of Kappa Alpha Psi Fraternity, Inc., and the Western Province**, which has jurisdiction over that Chapter, to publish, display, and/or utilize media, video, sound and/or photographs along with any images taken or obtained of my minor child/ward during his/her presence and/or participation in any activity sponsored in connection with Guide Right/Kappa League events and/or activities. I consent to the identified uses without past or future payment, prior or subsequent notice, and/or any form of consideration, monetary or otherwise.

I additionally agree to allow publication and/or use of media, video, sound and/or photographs obtained and/or generated in connection with on the World Wide Web, television, radio, newspapers, You Tube, DVD format, brochures, media guides, award and grant applications and/or any other type of printed or electronic communication in connection with Guide Right/Kappa League events and/or activities without payment, prior or subsequent notice, and/or any form of consideration, monetary or otherwise.

In addition to waiving any right to royalties or other compensation related to the above-agreed uses, we grant complete ownership of the images to Kappa Alpha Psi Fraternity, Inc. and its affiliated entities for the limited purpose of advertising, promoting and/or otherwise displaying Guide Right/Kappa League events and/or activities, and /or any other lawful purpose. In connection with this express permission, I waive inspection, and do not require approval of the finished product wherein my child/ward's image and/or voice is present.

Absent proof of intentional or malicious conduct engaged in for the sole and exclusive purpose of subjecting my child/ward to ridicule, reproach, scorn, and/or indignity, I specifically and expressly release and discharge any liability against the identified Chapter in this document, the Western Province of Kappa Alpha Psi Fraternity, Inc., the national organization, its members, officers, employees, representatives, agents and assigns from any and all judgments, expenses, claims, lawsuits, costs, judgments, or any other person/entity involved with the publication and/or utilization of the voice and/or image of my child/ward. This includes liability related to alterations, distortions, optical illusions, and editing.

I represent and certify that as the parent/guardian of \_\_\_\_\_ (print name) I am legally authorized to provide permission and consent to do those acts described in this Consent, Authorization and Release on behalf of my child/ward.

Dated:

\_\_\_\_\_

Parent/Guardian Signature

\_\_\_\_\_

Print Parent/Guardian's Name