I hereby grant the State of Oregon, acting by and through its Higher Education Coordinating Commission (“HECC”) and its partners (including but not limited to the U.S. Dept. of Labor, Oregon Employment Department, Business Oregon, Oregon Workforce and Talent Development Board, Local Workforce Development Boards, Governor’s Office, Oregon Community Colleges and Workforce Development, Oregon Department of Human Services, and Oregon Department of Education) permission to use my likeness in a photograph accompanied by a story and/or quote about me in any and all of its publications, including website entries, without payment or any other consideration.

I understand and agree that these materials will become the property of the HECC and its partners and will not be returned.

I hereby irrevocably authorize the HECC and its partners to edit, alter, copy, exhibit, publish or distribute this photo, story and/or quote for purposes of publicizing the above agencies’ programs or for any other lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photograph or story.

I hereby hold harmless and release and forever discharge the above agencies from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

I am 18 years of age and am competent to contract in my own name. I have read this release before signing below and I fully understand the contents, meaning, and impact of this release.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  | Click or tap here to enter text. |  | Click or tap to enter a date. |
| Signature  |  | Printed Name  |  | Date  |

|  |
| --- |
| If the person signing is under age 18, there must be consent by a parent or guardian, as follows: |

|  |  |
| --- | --- |
| I hereby certify that I am the parent or guardian of: | Click or tap here to enter text. |
| Named above, and do hereby give my consent without reservation to the foregoing on behalf of the person.  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  | Click or tap here to enter text. |  | Click or tap to enter a date. |
| Signature Parent or Guardian |  | Printed Name  |  | Date  |

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| LWDB only  |

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| Click or tap here to enter text. |  | Click or tap here to enter text. |  | Click or tap to enter a date. |
| Submitted By  |  | LWDB  |  | Date  |