## VIDEO IMAGE RELEASE

| I, (name)   | , hereby ir   | revocably consent to the royalty-free, non-  |
|---|---|--|
| exclusive use by the (Contestant  | )   | of video   |
| footage taken of me by (Video   | Taker's Name)   | . The  |
| (Contestant)  |   | has worldwide license to use, copy for   |
| use, distribute, display public   | cly, perform publicly   | y, create derivative works, and license others to  |
| do so for any purpose in con  | nection with (Contestan   | th and Communities Communities on the Move   |
| Video Challenge (the "Chall<br>reversing childhood obesity  | enge") and/or for the<br>and/or the three area<br>healthy, affordable t                                       | e purpose of educating the public about<br>s of interest, (1) healthy eating, (2) physical<br>food, until five years after the announcement of   |
| I also consent to the use with at the time of the video foota   | _   | f my name and any comments I may have made iting thereof.  |
| made of the video footage, n  |   |  |
|   |   | 's entrance and participation in   |
| the Challenge.  |   |  |
| For the video footage taken of  | of ma ()  | hy avide Talenda   |
| Name)   | and submitted   | by (Video Taker's  |
| in the Challenge, I, (name) others acting on behalf of <i>Le</i> worldwide license to use, coderivative works, and license purpose of educating the publinterest, (1) healthy eating, (2) until five years after the annual others. | py for use, distribute e others to do so for oblic about reversing (2) physical activity, ouncement of winner | , hereby grant <i>Let's Move</i> , USDA, and an irrevocable, royalty-free, non-exclusive e, display publicly, perform publicly, create the purpose of the Challenge and/or for the childhood obesity and/or the three areas of and/or (3) access to healthy, affordable food, rs. This license includes posting or linking to the Administrator websites and making it available |
|   |   | al of the video footage or of the use that may be mment(s) by <i>Let's Move</i> and/or USDA.   |
| I am of legal age or, if not of<br>of Parent/Legal Guardian pro   |   | t/legal guardian has signed the Consent/Release  |
| Signature   |   | Date   |
| Printed Name  |   |  |
| Contact Phone Number(to be used for consent verification  | n purposes only)  |  |

| Video Taker's Name & Contact Number:   |  |
|--|--|
| (to be used for consent verification purposes only)  |  |
| CONSENT/RELEASE OF P.  | ARENT/LEGAL GUARDIAN                       |
| I am a/the parent/legal guardian of the minor wh<br>Acting both for myself individually and on beha<br>execution of the foregoing Consent/Release by | alf of said minor, I hereby consent to the |
| Signature  | Date                                       |
| Printed Name   |  |
| Contact Phone Number   |  |
| Relationship to the Minor  |  |