

Canadian Dental Hygienists Association (CDHA) Photo/Video Release Form

Photos should be submitted as a good quality print or emailed in high resolution JPG, PNG or EPS format (minimum 300 dpi). Videos should be submitted as MOV, AVI or FLV files. A separate release form should be submitted for each image. All submitted images become the permanent property of CDHA and will not be returned.

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CDHA and its employees, agents/representatives will be held harmless and discharged from/against any claims, damages or liability arising from or related to use of this image. The permission granted is continuous and may only be reversed by specific written withdrawal of this authorization.

You must ensure that all recognizable individuals in the photo/video have granted permission for their image to be published in the manner(s) described above.

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Photo/Video Release

I hereby agree to allow my image to be used as set out above and confirm I have sought permission for the same from all recognizable subjects in the photo.

Name: _____

Description of image: _____

Signature _____ Date _____

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You may confirm the 3rd party permission by having individual subjects (or parents in the case of a minor child) in the image sign this form below **OR** you may seek and retain their permission in your own manner.

Signatures/release of photo subjects (Use reverse if necessary)

Name _____ Signature _____

Name _____ Signature _____

Name _____ Signature _____

Name _____ Signature _____

Name _____ Signature _____