



Eagles vs Ravens 2007

Community Wellness Activity Consent

I hereby grant full permission to SouthEast Alaska Regional Health Consortium (SEARHC) to use, publish, distribute, and exhibit my name, picture, portrait, likeness or voice, success stories or any or all the above in or in connection with the production of a television tape or film recording, sound track recording, motion picture film, film strip, or still photograph, in any manner for training and other purposes, and without limitation as to time. I hereby waive all rights for compensation in connection with the use of my name, picture, portrait, likeness or voice, or any or all of them in or in connection with the production of a television tape or film recording, sound track recording, motion picture film, film strip, or still photograph, (whole or in edited form) and any use to which the same or any material therein may be put, applied or adapted by SEARHC and others in the health field.

In signing this waiver, I acknowledge that SEARHC is released from any and all property damage, personal injuries, or other claims arising from or in connection with participation in any community wellness activities.

Participant's Name *(Please print)*

Date

Age: Under 18 18-29 30-39 40-49 50-59 60 and over

Signature *(Parent's signature for youth under 18)*

Mailing Address
SEARHC-Health Promotion
3245 Hospital Drive
Juneau, AK 99801

Fax
(907) 364-4489

Message Line
(907) 364-4456

I would like to be notified of any upcoming wellness activities in my community.

(Please check the seasons that you would like to participate.)

Winter Spring Summer Fall

