

MEDIA RELEASE AGREEMENT

I hereby assign and grant the following rights and permissions to the International Society of Women Airline Pilots, its employees and agents, including without limitation, its commissions, committees, and boards and members thereof ("ISA+21").

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I specifically consent to the digital compositing or distortion of the portraits or pictures, including without restriction any changes or alterations as to color, size, shape, perspective, context, foreground or background.

I consent to the use of any published matter in conjunction with such photographs.

I waive any right to royalties or other compensation arising or related to the use of such photographs.

I hereby waive any right that I may have, or my child may have, to inspect or approve the finished product or products and the advertising copy or other matter that may be used in connection with them or the use to which they may be applied.

I hereby release, discharge, and agree to hold harmless ISA+21, and all persons acting under its permission or authority or those for whom it is acting, from any and all claims, demands, and causes of action, including, but not limited to any liability by virtue of any blurring, distortion, alteration, optical illusion, or use in composite form, whether intentional or otherwise, which I, or my child for which I am executing this document on behalf of, our heirs, representatives, executors, administrators, or any other persons acting on my behalf or my child's behalf or on behalf of my or my child's estate have or may have by reason of this authorization.

I hereby warrant that I am of full age and have the right to contract in my own name, or on behalf of my child, indicated below. I have read the above authorization, release, and agreement, prior to its execution, and I am fully familiar with the contents, meaning, and impact of this document. This document shall be binding upon me, my child and our heirs, legal representatives, and assigns.

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I have read and fully understand the ISA+21 Media Release Agreement.

Participant's Name: _____

Participant's Signature: _____ Date: _____

Minor's Name: _____

Parent/Guardian's Signature _____ Date: _____
(if participant is under the age of 18)

Participant's Address: _____

Phone: _____ Email Address: _____

Please return to:
Any ISA+21 Member or secretary@isa21.org