

Phone Number

## **Art Showcase Release Form**

I hereby authorize the Multiple Sclerosis Association of America (MSAA), and its owners, directors, employees, agents, representatives, assigns, and affiliates to use my artwork, and biographical statement ("Submission") for whatever purpose, including but not limited to advertising, broadcast, internet or print publicity, promotional materials and membership materials such as newsletters and information, as well as social media in connection with its "Showcase" identified as an art exhibition that offers people with multiple sclerosis an opportunity to showcase their artwork.

I hereby authorize MSAA to modify, use, or assign, my Submission however it chooses, throughout the world an unlimited number of times in perpetuity, in any matter, all or any portion thereof and for any purpose without my additional approval.

I hereby authorize MSAA to use and license to others in connection with whatever purpose, my name, voice, likeness, and any biographical material that I may provide in my Submission without any additional consideration, including but not limited to making public announcements which will include the mention that I have multiple sclerosis.

I hereby waive any right of inspection or approval of my Submission and the uses that may be made of my entry and I understand that I have not been promised, nor will I receive any monetary compensation for the use of my work.

I warrant that I have the full right to enter into this Showcase, and that my Submission is an original work created solely by myself and does not infringe on the copyrights, trademarks, or rights of any third parties, and I will indemnify MSAA, its employees, agents, representatives, assigns, and affiliates against all costs and expenses of any kind whatsoever, including reasonable legal expenses, in connection with any claims concerning my Submission.

I agree to indemnify, release and hold the Multiple Sclerosis Association of America (MSAA), its owners, directors, employees, agents, representatives, assigns, and affiliates harmless for any claims as a result of my participation in this Showcase and I covenant not to sue MSAA, its owners, directors, employees, agents, representatives, assigns, or affiliates for any claims related to MSAA's exercise of the permissions granted hereunder. My signature below is valid.

I certify that I am 18 years old or over, or if not that this form has been signed by my legal parent or guardian.

I acknowledge that I have read and upon submitting my work, I agree to be bound by all terms and rules provided hereunder.

AGREED AND ACCEPTED:

Signature

Please Print Name

City, State, and Zip Code