



Photoshoot Room Participant Waiver Form

Please submit this completed form to the Programming Department when you check in at your time slot. *All members in a group entry must submit one. All minors must also fill out a Minor Permission form.*

Photographer's Name: _____

Assistant Name: _____

Are you at least 18 years old? (circle one)

Yes

No

(If "no", please attach a Minor Permission form.)

E-mail Address: _____

Phone Number: _____

Address:

I, _____ (please print), will participate in the Pacific Media Expo (PMX) 2016 Photoshoot Room taking place November 11 – 13, 2016. I further give my consent to PMX to acquire emergency medical treatment from competent medical personnel/facilities should that become necessary for any reason. I also grant Pacific Media Association (PMA) the right to use my name, likeness and/or footage taken for promotional purposes. My signature below indicates that I understand that I must abide by all rules, regulations and staff instructions while participating in the Photoshoot Room, and that PMX staff cannot prevent injuries because they cannot always control the conditions present or be present at all times. My signature below constitutes and is evidence of my agreement to (1) accept general liability for the participation of myself in the Photoshoot Room and (2) indemnify and hold harmless PMX, PMA, its employees, volunteers and agents, either jointly or severally, from and against any and all claims, damages, causes of action or injuries, including reasonable attorneys' fees and costs expended in defense thereof, incurred or resulting from my participation in the Photoshoot Room.

Signature: _____ **Date:** _____