



# Photo/Video Waiver Form

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Please read carefully

\_\_\_\_\_ I hereby grant permission to Holstein Canada to use images I am photographed in and/or video footage that I may appear in or that I have taken and provided for print or online materials. They reserve the right to reproduce, use, exhibit, display, broadcast, and/or distribute in connection with the activities of the Association designed for promotional, informational, or educational purposes.

AND / OR

\_\_\_\_\_ I hereby grant permission to Holstein Canada to use photographs of my minor child (child under the age of 18) in print or online materials and/or video footage in which my child may appear. They reserve the right to reproduce, use, exhibit, display, broadcast, and/or distribute in connection with the activities of the Association designed for promotional, informational, or educational purposes.

I have read and understand the above.

Name: \_\_\_\_\_  
(print name)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_