

**NAME, APPEARANCE, & IMAGE
AUTHORIZATION AND RELEASE**

This NAME, APPEARANCE, & IMAGE AUTHORIZATION AND RELEASE (the "Release") is entered into, and becomes effective, as of the date(s) below.

I, the undersigned, authorize EAST Inc., an Arkansas nonprofit corporation, along with its successors, assigns, agents, and affiliates (collectively the "Producer"), to make use of my name, appearance, and image for marketing/advertising purposes.

I agree that Producer may film, tape, and photograph me during and in connection with my appearance at/involvement with the EAST Initiative, and that Producer shall be the exclusive owner of the results and proceeds of such filming, taping, and photography with the right to use in any reasonable manner, throughout the world, in any format or medium, for an unlimited number of times in perpetuity, royalty free, all or any portion of my name, appearance, and image in connection with its marketing/advertising efforts. I understand that my name, appearance, and image will be available for viewing by the general public, and may appear on Producer's website, in print, or in other formats and mediums.

I waive any and all claims or rights against Producer and its employees and volunteers, whether such claims or rights are known or unknown before, during, or after the execution of this Release, including all claims resulting from the marketing/advertising of my name, appearance, and image, whether arising in whole or in part from action(s) or failure(s) to act, whether negligent or otherwise.

Furthermore, I hereby waive any right of inspection or approval of my name, appearance, and image or the uses to which such name, appearance, and image may be put. I acknowledge that Producer will rely on this permission and I hereby agree not to assert any claim of any nature whatsoever against anyone relating to the exercise of the permissions granted hereunder. I agree that Producer assumes no liability or responsibility with regard to its use of my name, appearance, and image.

This Release shall be governed by the laws of the State of Arkansas, and all disputes that might arise hereunder shall be adjudicated exclusively in Pulaski County, Arkansas. I expressly agree that this Release is intended to be as broad and inclusive as is permitted by the laws of the State of Arkansas, and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

I hereby execute this Release as of the date below.

_____ Participant's Signature	_____ Participant's Printed Name	_____ Date
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If the above-signed is a minor or does not have the capacity to sign, his or her parent, guardian, or other authorized individual must provide authorization as well by signing below.

I hereby execute this Release as of the date below.

_____ Parent's/Guardian's Signature	_____ Parent's/Guardian's Printed Name	_____ Date
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