



VQHA Youth Media Release Form

Please provide all the information asked for below.

Name: _____

Parent/Guardian's Name: _____

Home address: _____

I, Parent/Legal Guardian of (child's name) _____ hereby grants permission to the Virginia Quarter Horse Association (VQHA), its agents and assigns, to use above named child's photo or video, likeness and name for the purpose of promotion by the Virginia Quarter Horse Association (VQHA) for all forms, media and manners, for the following, but not limited to, news releases, photographs, video, audio, website, social media, marketing, advertising, trade, promotion, exhibition for an indefinite period of time.

I give unrestricted permission for images, videos, and recordings of the child to be used in print, video, digital and internet media. I agree that these images and/or voice recordings may be used for a variety of purposes and that these images may be used without further notifying me.

I further acknowledge that I will not be compensated for these uses and the Virginia Quarter Horse Association (VQHA) has full permission to the images, videos, and recordings, and to any derivative works created from them.

I waive any right to inspect the uses of any printed or electronic copy. I hereby release the Virginia Quarter Horse Association (VQHA) and its agents and assigns from any claims that may arise from these uses, including without limitation claims of defamation or invasion of privacy, or of infringement of moral rights or rights of publicity or copyright.

This Release expresses the complete understanding of the parties.

Signed: _____

Printed Name: _____

Date: _____

Relationship: _____

**** Please submit completed VQHA Youth Media Release forms, in hard copy, to the VQHA Youth Director. ****