

**Horizons Media 2019 Video Contest
Submission Form**

Full Name: _____

Date of Birth (M/D/Y): _____

Home Parish: _____

City, State: _____

Video Length: _____ (min.)

E-mail, Phone: _____

Additional Creator(s):

1. Name/DOB: _____

2. Name/DOB: _____

3. Name/DOB: _____

4. Name/DOB: _____

5. Name/DOB: _____

By signing and submitting this document, I hereby give Horizons Media my permission to license the video and use the video in any media for any purpose (excluding pornographic or defamatory) which may include advertising, promotion, marketing, journalism, fraternalism, or packaging for any product or service in the newspaper, online or other visual and/or printed text or graphics. I agree to all the rules and guidelines of the contest stated on the Eparchy of Parma's webpage.

I agree that I have no rights to the video, and all rights to the video belong to Horizons Media. I acknowledge that I have no further right to additional consideration or accounting, and that I will make no further claim for any reason to Horizons Media. I acknowledge and agree that this release is binding upon heirs and assigns, is irrevocable, worldwide and perpetual and will be governed by the laws of the United States of America.

I represent and warrant that I am at least 18 years of age and have the full legal capacity to execute this release. (Parent/Legal Guardian signature is required for persons under age 18.)

Signature: _____ **Date:** _____

Parent/Guardian: _____ **Date:** _____

(if under age 18)

