

PERMISSION FORM

I	voluntarily agree for me and/or my child(ren) to participate in
any courses, curriculum, and educa	ational presentations or campaigns (the "Campaign") sponsored
by CLEAR Alliance (the "Promotors	").

I understand and agree to the following:

- This prevention education effort features both urban and rural youth and adults sharing facts, including but not limited to, substance misuse, impaired driving, and mental health and wellness.
- The purpose and goal of the Campaign is to raise awareness and share facts with other youth and parents across Oregon and other states and territories.
- The Promotors may use my name or likeliness in photos, materials, websites, social media, curriculum, and advertisements associated with all other media products, both digital and print.
- I understand that I may revoke my authorization, in writing, at any time before the
 photographer or videographer takes my photo or video. I understand that once Campaign
 materials, models, and other media are photographed, developed and/or disseminated
 publicly, they cannot be retracted.
- I hereby irrevocably authorize the Promotors to edit, alter, copy, exhibit, publish, or distribute materials with my name or likeness for any lawful purpose. In addition, I waive any right to inspect or approve the finished product wherein my name or likeness appears. Additionally, I waive any right to royalties or other compensation arising from or related to the use of my name or likeness by the Promotors.
- I understand that it is common for the youth and adults who participate in the Campaign to be seen by others as role models. Therefore, I am choosing to participate because I am a youth or adult who supports drug awareness and education with the goal of preventing substance abuse and impaired driving.

- To demonstrate my commitment to this education, I agree to allow the Promoters to check both solicited and unsolicited references about me, including but not limited to school staff, law enforcement, and/or peer references.
- To the maximum extent permitted by law, and on behalf of my heirs, representatives, executors, administrators, or other persons acting on my behalf, I agree to hold the Promotors harmless and waive any claims I may have under state or federal law against the Promotors arising from or relating to any of the subject matter in this permission form.

	SIGNED AS PARTICIPATING YOUTH OR ADULT:
Name:	
Signature:	
Address:	
Phone:	
Email:	
Date:	
C	ONSENT OF PARENT OR LEGAL GUARDIAN OF CHILD
and agree to th	r legal guardian of, I have read, understand le terms and conditions set forth in this permission form the above-named minor. Into or Guardian:
Name of Pa	rent/Guardian:
Signature:	
Address:	
Phone:	
Email:	