



**Old Dominion (VA) Chapter  
The Links, Incorporated**

***Scholarship Appendix A: Photography Release Form***

I hereby authorize Old Dominion (VA) Chapter, The Links, Incorporated, also known as ODC, the right and permission to use my submitted photo, image or likeness, in any and all of its publications, reports, notices, conventional and social media outlets, including but not limited to all ODC marketing, announcements both in printed and digital publications, websites and mediums in connection with ODC Scholarships. I understand and agree that any photograph using my likeness will become property of ODC and will not be returned.

I hereby irrevocably authorize Old Dominion (VA) Chapter, The Links, Incorporated, to edit, alter, copy, exhibit, publish or distribute this photo for purposes of publicizing ODC programs for any other lawful purpose. I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the image, photo, website and media postings, social media postings, etc. I acknowledge that since my application for the Old Dominion (VA) Chapter Scholarship is voluntary, I am not guaranteed financial compensation.

I hereby release, discharge and agree to indemnify and hold harmless the Old Dominion (VA) Chapter, The Links, Incorporated, its legal representatives, committee members or assigns under its permission or authority, from all claims, demands, payments, and causes of action which I, my heirs, representatives, executors, administrators or any other person acting on my behalf or on behalf of my estate have or may have, whatsoever arising out of or in connection with the foregoing, and waive any right to inspect or approve the same, by reason of this authorization.

Lastly, I am at least 18 years of age and am competent to contract in my own name. I have read this release before signing below and fully understand and agree with the contents, meaning, and impact of this release.

I agree to release my photo/video image       I do not release my photo/video image

Participant Information:

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

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

Printed Name: \_\_\_\_\_