

# OneLegacy Donate Life Rose Parade® Float Consent for Use of Name and Likeness - Minor Rider/Walker



I, \_\_\_\_\_, as the legal representative for (name of child) \_\_\_\_\_, hereby consent to the use of his/her name and likeness for the sole purpose of promoting organ, eye and tissue donation. I understand that the use of his/her name and likeness may include, but not be limited to, photographs, newspaper articles, brochures, displays, television, radio, or any other public community relations material. I hereby acknowledge that this authorization is volunteered without obligation of any kind on the part of the OneLegacy Donate Life Rose Parade® Float committee, partners, their employees, and designated agents. This authorization is given without hope or expectation of reward or compensation of any kind. I hereby waive my right to inspect or approve any materials which may, from time to time, be created by the OneLegacy Donate Life Rose Parade® Float committee and partners, which may include his/her name, image, photo, likeness or voice. I, together with my heirs, assigns, agent, guardians, and legal representatives hereby release the OneLegacy Donate Life Rose Parade® Float committee and partners from any and all claims, liabilities, and losses that may arise from its use of his/her name, image, photo, likeness and voice.

\_\_\_\_\_  
*Signature of Parent or Legal Guardian*

\_\_\_\_\_  
*Date*

Print Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_