

	staff use only
#	WD

I.	
PLEASE PRINT FULL LEGAL NAME CLEARLY	
give my consent for the minor	, age
PLEASE PRINT MINOR'S FULL LEGAL NAME CLEARLY	MINOR'S AGE
to participate in the Kraken Con Costume Contest occurring on September 29, 2018. I und appointed guardian older than 13 must be present for the duration of the Contest if the m	
I understand that the minor will be photographed and videotaped while participating in the photographers and videographers acting for Kraken Con and Sea Monster Media LLC and media representatives. I consent to such recording of the minor, their voice and likeness, a accessories they may be wearing during Kraken Con. I grant to Sea Monster Media LLC and copyright, use, publish, reproduce, display, distribute, create derivative works from, licens photos or footage, in whole or in part, of the minor, their voice and likeness, and their cost any manner in perpetuity, including for internet, broadcast, and similar; for purposes including highlights videos and other marketing material without any compensation to me. I waive a inspect and approve the finished product or copy that may be used in connection with an photographer and/or videographer has taken of the minor during the Costume Contest, or applied.	approved industry and and any costumes or d Kraken Con the rights to se and otherwise use any tume in any media and in uding but not limited to in any right that I may have to image that the
I hereby release Sea Monster Media LLC, Kraken Con, the Marriott and/or any of its authorany and all harm, liability or damage from any physical injury or property losses the minor result from performing in the Kraken Con Costume Contest. In consideration of the Minor Con and Sea Monster Media LLC to participate in the Costume Contest, I the undersigned am the parent or legal guardian of the Minor whose name appears above. I understand ar terms and conditions apply to the Minor and to me. I further agree to indemnify and hold Sea Monster Media LLC from any and all claims which are brought by, or on behalf of the anyway connected with the Minor's participation in the Costume Contest.	r may suffer which may being permitted by Kraken d represent and affirm that I nd agree that the above harmless Kraken Con and
My signature establishes that I have carefully read and understand this agreement and it is execute a complete and unconditional waiver and release of all liability to the full extent of age or older and mentally competent.	
Please complete and bring this form to the Costume Contest check in.	
Parent or Guardian Name Dat	e
Parent or Guardian Signature	
Street Address	

Emergency Contact Phone

City, State, Zip ______ Phone _____