**Photo Release Consent**

I authorize the PNASD Nurse Excellence Awards Committee to publish the attached

Photograph. I further consent that the above photograph can be used by the awards

committee for:

* Use for publication in the PNASD souvenir program
* Use as a part of the visual presentation
* Publication in local newspapers and other electronic media, including the PNASD Facebook page

I waive the right for compensation for the above uses of photograph. I will not hold PNASD liable for and/or any claim for injury or compensation resulting from activities authorized by this organization.

Furthermore, this photograph hereby submitted becomes a property of PNASD, and I will not in any way demand or claim for its return.

The term “photograph” as used in this agreement shall mean motion picture, still photography, videotape, video disc and any other mechanical means of recording, and reproducing images.

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Signature of Candidate Date

Attach the most recent photo to the consent form; PNASD Nomination form must be signed by both the candidate and the nominator and submitted with all the required documents.