

Meeting Participant Release Form

I do hereby authorize AHRQ, _____, assignees, successors, and those acting pursuant to its authority to:

- a. Record my participation and appearance at this meeting on videotape, audiotape, film, photograph, or other medium.
- b. Use my name, likeness, voice, and biographical material in connection with or promotion of these recordings.
- c. Exhibit, broadcast, Webcast, store and forward, copy, edit, and/or distribute such recording in whole or in part without restriction or limitation for any educational, commercial, or promotional purpose which AHRQ, assignees, successors, and those acting pursuant to its authority, deem appropriate.
- d. No royalties, compensation, or residuals will be paid.
- e. I hereby waive any right to inspect and approve the rough cut, promotional, or finished product.

Name:

Address:

Phone Number:

Email:

Signature: