PHOTOGRAPHY RELEASE FORM

This letter confirms the agreement between you and Kin Canada regarding your participation in approved Kin Canada activities in which you may be photographed and/or videotaped (the Property) from time to time.

You hereby irrevocably grant to Kin Canada perpetually, exclusively, and for all media throughout the world (including print, non-theatrical, home video, CD-ROM, Internet and any other electronic medium presently in existence or invented in the future), the right to use and incorporate (alone or together with other materials), in whole or in part, photographs or video footage taken of you as a result of your participation in approved activities of Kin Canada.

You hereby agree that you will not bring or consent to others bringing claim or action against Kin Canada on the grounds that anything contained in the Property, or in the advertising and publicity used in connection herewith, is defamatory, reflects adversely on you, violates any other right whatsoever, including, without limitation, rights of privacy and publicity. You hereby release Kin Canada, its organizers, directors, agents, officers, officials, servants, representatives, assigns and successors from and against any and all claims, demands, actions, causes of actions, suits, costs, expenses, liabilities, and damages whatsoever that you may hereafter have against Kin Canada in connection with the Property.

This agreement shall not obligate Kin Canada to use the Property or to use any of the rights granted hereunder, or to prepare, produce, exhibit, distribute or exploit the Property.

IN WITNESS WHEREOF I/we have hereunto set my/our hand and seal this _____day of

_____, 20____.

_____ Per: _____

(Name of Organization) (Please print name of officer or other person authorized to bind the Organization.)

_____ _____

Name of Witness Name of Individual

(Please print: _____) (Please print: _____)

_____

Name of Individual*

(Please print: _____)

_____ *If individual not of the age of majority, then guardian to sign as well.

(If Guardian, please print name: _____)

(Status of Guardian _____ i.e. Parent/court appointed/etc.)