OneLegacy Donate Life Rose Parade[®] Float

Consent for Use of Name and Likeness of Deceased Donor

I,_____, as the legal representative for (name of donor)_____, 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 Next-of-Kin/Legal Representative	Date	
Relationship to Donor		
Print Name:		
Street Address:		
City/State/ZIP:		
one: ()		