

CONSENT AND LICENCE FORM

(for program participants aged 18 and under)

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Program Name (the "Program")

SUMMARY

We are pleased that your child is participating in the Program at the Vancouver Public Library. As part of the Program, your child will undertake projects, create new content, and express ideas in physical and/or digital forms (the "Content"). By signing this consent and licence form, you consent to and licence VPL to collect your child's Content to use for non-commercial purposes, such as, but not limited to, use in program brochures, on public displays, or through the Internet in any format or medium or published in an anthology in physical and/or digital forms and made available to be borrowed from any branch of the Vancouver Public Library (the "Purpose").

CONSENT

- □ **YES**, I consent for my child's Content to be used for the Purpose
- □ **NO**, I do not consent for my child's Content to be used for the Purpose

GRANT OF LICENCE

On behalf of my child, I hereby grant to VPL an irrevocable, non-exclusive, non-transferable, royalty-free licence to use my child's Content for the Purpose, to lend that Content to VPL's patrons in VPL's sole discretion, and the unrestricted right in perpetuity to keep, copy, use, publish, display, and/or broadcast the Content.

I acknowledge there will be no money or other compensation payable by the Vancouver Public Library to me for the use of my child's Content. The copyright in the Content is and will remain the exclusive property of me/my child and no right, title, or interest in or to the copyright in the Content is granted to the Vancouver Public Library other than a limited right to use the Content under the terms of this consent. I agree that the Vancouver Public Library is granted free of charge and forever the right to edit and modify the Content as it sees fit without my/my child's consent

Program Date (MM/DD/YYYY)

(otherwise known as "waiver" of artistic or moral rights under copyright law).

WAIVER AND RELEASE

In consideration for my child being permitted to participate in the Program, I hereby release and forever discharge VPL from any and all liability for any and all losses, damages, injuries, harm, or expenses of any kind that I or my child may suffer, incur, or experience in any way arising from or in connection with any act or omission of my child.

I confirm that I have read and accept the contents of this document.

Child's Name (print)

Parent/Guardian's Signature

Date (MM/DD/YYYY)

Parent/Guardian's Name (print)

Address and Phone Number

Witness Signature

Witness Name (print)

Witness Address and Phone Number

Content Name/Location (for staff use)