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Notice of Video and Audio Recording of Game Sessions

FORM 7: Version 20141006b

NOTICE: All gaming sessions are recorded. This is primarily for the benefit of the Game Master (GM) to keep track between different groups and adventures and help with preparation for future sessions, but also may be used for quality services purposes (helping GM improve technique), and potentially for research purposes.

Initial to acknowledge that you have been informed that game sessions will be recorded:

X_____ (initials).

Please indicate your agreement to the foregoing by signing below.

Signature _____ Date _____ Print Name

If you are under eighteen (18) years of age, your parent or guardian must sign below: I represent that I am a parent/guardian of the minor who has signed the above release and that in that capacity, RPG Research has my consent and authorization to use the name, voice and/or image and likeness of the minor as described above.

Parent/Guardian:

Signature _____ Date _____

Print Name ______

Waiver for Audio, Video Recording and Use of Likeness

I hereby irrevocably authorize RPG Research to edit, alter, copy, exhibit, publish, adapt, perform, reproduce, modify, make derivative works, distribute or otherwise use my own/my child's voice, image or likeness for purposes of publicizing or promoting RPG Research's products, services or programs or for any other lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my own voice, image or likeness appears.

Additionally, I waive any right to royalties or other compensation arising or related to use.

RPG Research may exercise any of these rights itself or through any successors, transferees, licensees, distributors, assigns or other parties, commercial or nonprofit.

I hereby hold harmless and release and forever discharge RPG Research, its successors, transferees, licensees, distributors and assigns from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf, or on behalf of my estate or my child's estate have or may have by reason of this authorization.

Please indicate your agreement to the foregoing by signing below.

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Print Name		

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