



CONTROL NO: (To be filled in by FamilyStories)

# Thank you for sharing your stories and pictures with us!

Our books and activities bring together families around the world. Today we are gathering stories and pictures that might be included in future FamilyStories books and activities. If your story or photograph is selected for publication, we will notify you by correspondence to the address you provide below. If your or your child's name is used in a FamilyStories publication, you will receive a complimentary copy of the publication. Please review and sign the following to submit stories and pictures for potential publication.

## RELEASE AND ASSIGNMENT

In consideration of the potential publication of the attached submission (the "Submission"), I hereby irrevocably assign to SharingStories, Inc., its agents, licensees and assigns, all of my right, title and interest, including all copyrights and rights of publicity, in the photographs and/or stories contained in the Submission for use in whole or in part or in conjunction with other photographs, stories or other materials, in any medium, for the purpose of inclusion in a future FamilyStories book, activity or other product or the advertising, marketing or sale thereof without any further compensation to me. I further authorize SharingStories, Inc. to attribute the Submission using the identifying information provided below.

This agreement constitutes an assignment of copyright in the Submission. By signing this agreement, I acknowledge that I am the author, creator and/or photographer of the Submission or the parent or legal guardian of the author, creator and/or photographer, if such person is under the age of eighteen (18), and that I have the authority to convey, transfer, sell and assign the attached Submission to SharingStories, Inc. and that no third party has any rights in the Submission.

SharingStories may alter or edit the Submission in any way and SharingStories may determine, in its sole discretion, whether the Submission, if used, is attributed to its creator or used anonymously. I waive any right to approve any use of the Submission which SharingStories, Inc. may make or authorize and I release, discharge and agree to save harmless SharingStories, Inc., its agents, licensees and assigns, from any claim or liability in connection with the use of the Submission as aforesaid or by virtue of any alteration, processing or use thereof in composite form, whether intentional or otherwise.

I am over eighteen (18) years of age and I have read, understood and executed this Release and Assignment as of the date set forth above.

Date: \_\_\_\_\_

Identifying Information (for attribution):

Signature: \_\_\_\_\_

Creator's First Name: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Creator's Last Initial: \_\_\_\_\_

Creator's Hometown: \_\_\_\_\_

FOR MINOR:  
I am the parent or legal guardian of:  
\_\_\_\_\_

Creator's Age: \_\_\_\_\_

Description of Submission: \_\_\_\_\_

Contact Information:

address: \_\_\_\_\_

e-mail: \_\_\_\_\_

phone: \_\_\_\_\_