



ONCC Release for Publication of Photographs

I grant permission to the Oncology Nursing Certification Corporation (ONCC) to publish photographs taken of me on _____ (date) at _____ (event).

I understand and agree that the photographs will become the sole property of ONCC and irrevocably authorize ONCC to edit, crop, copy, exhibit, publish or distribute the photographs an unlimited number of times in any format, including electronic and print form, for educational, professional, and for any other lawful purpose. In addition, I waive the right to inspect or approve the finished product. Additionally, I waive any right to royalties or other compensation arising or related to ONCC's use of the photographs.

The following restrictions apply.

- The photographs will be archived electronically at the ONCC National Office at 125 Enterprise Drive, Pittsburgh, PA 15275-1214.
- The photographs will not be distributed or sold to any outside organization.
- ONCC publications may be distributed to ONCC certified nurses, noncertified nurses, subscribers, corporate sponsors, advertisers, and other healthcare professionals.
- The photographs may be used in subsequent publications authorized by ONCC.
- Subjects may or may not be identified in the publications.

I hereby hold harmless and release and forever discharge ONCC 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 have or may have by reason of this authorization.

I have read this release before signing below and I fully understand the contents, meaning, and impact of this release.

Signature _____ Date _____

Print Name _____