VISIONARY INTEGRATION PROFESSIONALS, LLC VIDEO RELEASE FORM.

I hereby grant Visionary Integration Professionals, LLC permission to use my likeness in a photograph, video, or other digital media ("photo") in any and all of its publications, including web-based publications, without payment or other consideration.

I understand and agree that all WITS scholarship video submissions will become the property of Visionary Integration Professionals, LLC and will not be returned.

I hereby irrevocably authorize Visionary Integration Professionals, LLC to exhibit, publish, or distribute my WITS scholarship video submission for any lawful purpose. In addition, I waive any right to inspect or approve the finished product wherein my likeness and/or WITS scholarship video submission appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the WITS scholarship video submission.

I hereby hold harmless, release, and forever discharge Visionary Integration Professionals, LLC 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 AND UNDERSTAND THE ABOVE WITS SCHOLARSHIP VIDEO SUBMISSION RELEASE. I AFFIRM THAT I AM AT LEAST 18 YEARS OF AGE, OR, IF I AM UNDER 18 YEARS OF AGE, I HAVE OBTAINED THE REQUIRED CONSENT OF MY PARENTS/GUARDIANS AS EVIDENCED BY THEIR SIGNATURES BELOW.

Signature	Date
Parent/Guardian Signature (if under 18)	Date