



2020 Art for the Ages

Art Show & Online Display Authorization Form

ICAL members have an opportunity to showcase their residents' artwork through ICAL's Art for the Ages program. This program includes an exhibit at the Annual IHCA Virtual Convention & Expo and an online display. Members will need to take digital photographs (must be a JPEG file) of their resident's artwork as well as the artists. Each resident artist, along with the administrator/executive director or another contact from the AL/SLF facility should sign and date the form below. **Each artwork piece must have a corresponding authorization form.** The deadline for submissions is September 4, 2020. Return completed form to Jackie Webb at jwebb@ihca.

License, Release and Authorization from Resident to Display Artwork

I, the undersigned, hereby grant to the Illinois Health Care Association/Illinois Center for Assisted Living, its successors, assigns, licensees, agents, and legal representatives ("IHCA/ICAL") the right and license to use, copy, edit, display, distribute, broadcast, publish, and make derivative works from the artwork or other materials I have uploaded and/or given to IHCA/ICAL (the "Artwork"). The license granted by me is royalty-free, irrevocable, perpetual, non-exclusive, and extends to the Artwork, in whole or in part, on a worldwide basis, in any form, media or technology now known or later developed, including for promotional or marketing purposes, without approval, attribution, or right to any compensation.

Furthermore, I consent to having my name, image, voice, likeness, biographical information and statements (collectively, my "likeness") used in connection with the artwork for any purpose authorized by this document.

I hereby certify that my entry is my ORIGINAL WORK and IDEA and is not a copy, duplicate or replication of any published art or any other materials protected by copyright laws. I understand that IHCA/ICAL will not be responsible for the loss or damage to the artwork I have submitted.

I hereby warrant that I am eighteen years of age or older (or that this release has been signed by my parent/legal guardian), am fully competent to execute this release, have read this document before signing below and fully understand its contents, meaning, and impact. In addition, I warrant that the artwork is my original creation, and that my execution of this release, and IHCA/ICAL's use of the materials and/or my likeness, will not conflict with any other agreement to which I am bound.

Signatures:

Artist/Resident

Administrator/Executive Director or AL Center Contact

Print Name

Print Name

Date

Date

Name of Assisted Living Community

City, State