

CONSENT AND RELEASE AGREEMENT

I, on behalf of myself, grant Florida Hospital and its successors and assignees, a perpetual, irrevocable and on an unrestricted basis, the right to use, re-use, publish, re-publish, broadcast or re-broadcast in any medium (e.g., broadcast news, print news, internet web-site, institutional viewing, newspaper, magazines, brochures, books, etc.), my name, my attached photograph (if applicable), my impressions of the book entitled *Forgive to Live: How Forgiveness Can Save Your Life*, my impressions of the author, Dr. Dick Tibbits, or a personal story I submit (collectively "Submission").

I WAIVE ANY AND ALL RIGHTS I MAY HAVE TO ANY CLAIM FOR PAYMENT OR ROYALTIES IN CONNECTION WITH ANY USE, RE-USE, PUBLISH, RE-PUBLISH, BROADCAST OR RE-BROADCAST, REGARDLESS OF MEDIUM, OF MY SUBMISSION.

I WAIVE ALL CLAIMS AND RELEASE FLORIDA HOSPITAL (INCLUDING ITS OFFICERS, EMPLOYEES, DIRECTORS AND AGENTS) AND ITS SUCCESSORS AND ASSIGNEES FROM ANY LIABILITY ASSOCIATED WITH THE RIGHT TO USE, RE-USE, PUBLISH, RE-PUBLISH, BROADCAST, RE-BROADCAST, MY SUBMISSION GRANTED IN THIS AGREEMENT.

I hereby warrant that I am over the age of 18 and have the right to contract in my name. I have read and understand this Agreement. This release shall be binding upon me, my heirs, legal representatives and assigns.

If I do not want to grant the rights set forth herein, I understand that I should not submit this Submission.

Date: _____

Print Name: _____

Signature: _____ [YES]

Address: _____

Phone Number: _____

Submitted To:
Florida Hospital Publishing
683 Winyah Drive
Orlando, FL 32803
407-303-1929
HealthProducts@FIHosp.org