

Standard Photo, Recording and Video Release Form for Adult

I authorize and grant permission to Cool Springs Associates, L.P., a Pennsylvania limited partnership, Oxford Club of Wexford GP, LLC, a Pennsylvania limited liability company, or Wildwood Highlands OPCO, LLC, a Pennsylvania limited liability company (jointly and severally, together with the parent company and any affiliates of each of the foregoing entities, collectively, the "**Company**"), or its designee, to record, film and photograph me at the (i) Allegheny Health Network Sports Complex at Cool Springs, 3001 Cool Springs Drive, Bethel Park, Pennsylvania 15234, (ii) Oxford Athletic Club, 100 Village Club Drive, Wexford, PA 15090, or (iii) North Park Sports Complex, 2330 Wildwood Road, Wildwood, PA 15091 (each, the "**Facility**").

I understand that the Company will retain the ownership rights to these photographs, videos and recordings.

I irrevocably authorize and permit the Company to display, broadcast, publish, disseminate, reproduce, modify, edit, alter, adapt, create derivative works, and otherwise copyright, use and permit others to use the photographs, videos and recordings and my name, image, and other personal characteristics and statements on a perpetual basis throughout the world and in any medium or format, including but not limited to, in and on print publications, electronic publications, audio-visual media, and the internet for advertising, promotion, business or commercial purposes and any other purpose and in any manner and medium, without restriction and without my inspection or approval.

I release, discharge and agree to hold harmless the Company and its members, managers, employees, agents, contractors, photographers and videographers and their respective successors, assigns, heirs and personal representatives from any claims, demands and liabilities by me or any third party in connection with the above.

I give up any and all rights to these photos, videos, transcripts, and recordings and understand that I will not receive any payment or compensation for the same now or in the future.

I further agree not to use any photo-capturing or video-recording device to create photographs or videos while at the Facility, without the prior approval of the Company. I agree to assign, and do hereby assign, to the Company all copyrights in any photos or videos created by me at the Facility without the prior approval of the Company.

I affirm that I am over the age of legal majority, have the right to contract in my own name, and agree to the terms of this Release Form. By signing below, I hereby acknowledge that I have read and understand this document and fully agree to the terms and conditions set forth above.