



## 2027 INSPIRING SALON OF THE YEAR RELEASE FORM

This form must be submitted with your 2027 PBA NAHA entry

A release form is required for each 2027 PBA NAHA entry. Incomplete entries and release forms will be disqualified, and entry fee not refunded. No other release forms will be accepted.

I, the undersigned entrant, the undersigned grant the PBA North American Hairstyling Awards (PBA NAHA) and the Professional Beauty Association (PBA) and those authorized by PBA, the right and license to use our names and images, and to publicly display, distribute, edit, transmit, reproduce and create derivative works using the images, in whole or in part, in any media or format, as part of the PBA NAHA competition or for any PBA NAHA or PBA purpose, including publicizing and promoting PBA NAHA or PBA.

This license is royalty-free, worldwide without restriction as to location or manner of PBA NAHA's or PBA's use. This license is granted for a period of five (5) years from the 2027 PBA NAHA Awards (the "Term"), except that PBA NAHA or PBA may store and use the images for historical and archival purposes after the Term. PBA NAHA and PBA will include a photo credit, including the entrant's name, with any photo used for publicity or promotional purposes, if feasible. We, the undersigned entrant, photographer, models and all other parties involved, understand that we retain all other rights to these images.

By entering this competition, and by signing this release, the undersigned entrant, photographer, models and other parties involved, each waives the right to make any claims against PBA, PBA NAHA, the PBA NAHA judges, any co-sponsors or group which endorses PBA NAHA or assists with the competition. We understand that the decision of the judges is final. We further agree to abide by all competition rules issued now or hereafter.

### ENTRANT CONTACT INFORMATION

**Please print legibly. PBA NAHA is not responsible for spelling errors.**

Salon Owner's Name: \_\_\_\_\_

Salon Name: \_\_\_\_\_

Salon Phone: \_\_\_\_\_

Alternate Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Salon Owner's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### SALON INFORMATION

Year Established: \_\_\_\_\_

# of employees/stylists: \_\_\_\_\_