

## Photographic and Video/Audio Recording Release

Merck Sharp & Dohme Corp., a subsidiary of Merck & Co., Inc., Kenilworth, New Jersey USA ("Company") appreciates your willingness to cooperate in photo-taking / video recording / audio recording for our Company business-related communication purposes.

We are sure you will understand that it is desirable to have the people who are photographed/recorded sign this release form indicating their consent to the Company's rights to use the media and to assure that the Company's records are complete in regard to the availability of the media.

Please complete the form below and return your signed release to the requester.

I hereby irrevocably consent to and authorize the use and reproduction by the Company at the address listed below, of any and all photographs and recordings that you have this day taken of me, for any purpose whatsoever, including but not limited to publication and distribution in print and/or electronic form, without further compensation to me. The photographs, digital files, recordings and works derived therefrom shall constitute the sole property of the Company.

I hereby release and discharge the Company, and its agents, its subsidiaries, affiliates, officers, employees, administrators, licensees, successors, and assigns from any and all claims, actions, and demands, arising out of or in connection with the use of the photographs / recordings including but not limited to any and all claims for defamation, invasion or privacy, invasion of rights of publicity, and copyright infringement.

I also hereby consent to the Company transmitting these photographs and recordings of me to its international sites and contractors worldwide, including countries which may have less stringent data protection laws than this country, for these purposes. I understand that the Company's collection, use and disclosure of this information will be consistent with applicable laws, rules, regulations, and corporate policies and procedures, and that I can review the Company's privacy statement at anytime at <http://www.msd.com/privacy/>.

This authorization and release shall ensure to the benefit of all legal representatives, licensees, and assigns of the Company.

I am over 21 years of age.

Date: \_\_\_\_\_ Signed: (legal signature) \_\_\_\_\_

Printed name: \_\_\_\_\_

(If the person signing is under age, cross out the last sentence above and the following consent of the minor's parent or guardian should be completed.)

I represent that I am the parent or legal guardian of the above named person. I hereby consent to the foregoing on their behalf.

Date: \_\_\_\_\_ Signature of Parent or Guardian: \_\_\_\_\_

### **If you are not an employee of the Company, please complete:**

Home address: \_\_\_\_\_

Telephone number: \_\_\_\_\_

For Internal Use Only.

Description: \_\_\_\_\_

Location: \_\_\_\_\_

Production representative: \_\_\_\_\_

Company representative: \_\_\_\_\_

