Broadcast Permission

Please type or print information clearly

I hereby authorize Leidos Biomedical Research, Inc., (hereto after referred to as "LBR") to broadcast my image, voice, and data, and grant all rights to use these images and sound in any medium for educational, promotional, advertising, or other purposes that support the missions of LBR and/or the National Cancer Institute. I agree that all video images and sound belong to LBR, and may be edited or enhanced as deemed appropriate.

Speaker information

1. First Name	2. Last Name	3. Organizational Affiliation
4. Event Title	5. Date	6. Time

7. Employment
- ☐ U.S. Government Employee
- ☐ Contractor Employee (Name of Contractor) _____
- ☐ Other – please specify _____

Permission

8. I approve of my presentation to be broadcast via:
- ☐ WebEx
- ☐ Video TeleConference (VTC)
- ☐ Video TeleConference (VTC) between the NCI at Frederick Conference Center locations of Bldg. 549 and the ATRF only
- ☐ VideoCast
- ☐ Other _____

9.
- ☐ I permit the recording of this talk.
- ☐ I permit a recording of this talk to be posted to the internet for public access.
- ☐ I permit a recording of this talk to be posted to an internal (NIH/NCI only accessible) intranet site.

10. Signature of Speaker	11. Date

Clear Form | Print Form Only | Print Form and Instructions

Broadcast Permission – Instructions

1. Speaker's first name.
2. Speaker's last name.
3. Speaker's organizational affiliation
4. Title of the event.
5. Date of the event.
6. Time of the event.
7. Speaker's employment affiliation.
8. Broadcast permission types.
9. Recording permission types.
10. Signature of speaker.
11. Date signed by speaker.