

**Release of Liability and Finalist/Winner Acceptance Form for the
New York City Fire Department (FDNY) #SmokeAlarmSelfie Contest**

Print and fill in all the required information below:

Name: _____

Address: _____

Phone Number: _____ Email Address: _____

I understand that I am one of the finalists of the #SmokeAlarmSelfie Contest (the "Contest") run by the New York City Fire Department ("FDNY") and I do hereby accept the finalist position or winner position. I further understand that if I do not return this form completed by no later than November 15, 2014, my entry will be disqualified and another finalist or winner will be selected. Meals, travel, incidentals, gratuities and all other expenses related to the Prize not specifically mentioned herein are my responsibility. No transfer, change, or cash substitution of Prize is permitted except at the sole discretion of the FDNY.

I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS the City of New York, and each of its parents, subsidiaries, directors, officers, officials, agents and/or employees, and the other participants, sponsors, advertisers, and owners (collectively, "RELEASEES"), from any and all claims, demands, losses, and liability that I now have, or hereafter may have, by reason of any matter connected in any way or arising out of the Contest, my participation in the Contest, the awarding of the giveaway Prize(s) or to any loss or damage to the giveaway Prize(s), including but not limited to, any INJURY, DISABILITY OR DEATH I may suffer, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OR WILFUL MISCONDUCT OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

I hereby give my consent to the FDNY and any of its agents, contributors, partners, or affiliates of the Contest to use my entry and my name, voice, photograph, or likeness for advertising, publicity, or trade purposes in any and all media worldwide (including a prize winner's list) without additional compensation or notification, as set forth in the Official Rules for FDNY's Contest.

I HAVE READ THIS PRIZE ACCEPTANCE AND RELEASE OF LIABILITY FORM, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Signature: _____

Notary Public:

Date: _____

Sworn to before me
this - ___ day of _____, 2014

Signature