

AUTHORIZATION, INFORMED CONSENT AND RELEASE

1. Applicants understand that Hasidah's mission is to build Jewish families and agree that Judaism will be the sole religion practiced in the home and that if blessed with children, they will be raised in a Jewish environment.
2. Applicants hereby assign and grant Hasidah and its legal representatives the irrevocable and unrestricted right to use excerpts in whole or in part from the Applicant's personal statement for any purpose and in any manner and medium and to alter the same without restrictions. Hasidah additionally has the exclusive right to develop and tell the applicants story related to the applicant's efforts to build a family, including but not limited to information regarding the applicant and her/his partner, the applicant's immediate family members, the applicant's medical and financial struggles related to pregnancy, pregnancy loss, infertility, fertility treatment and the like.
3. Applicants grant permission to Hasidah to use photographs or video media in printed or electronic matter for use in publication and marketing materials and to participate in all future requests for television appearances and other media forums for marketing purposes for up to five years from the date the grant or loan was awarded.
4. Applicants agree to be truthful with respect to all information provided to Hasidah in their application and understand that incomplete, inaccurate or false information may cause significant harm to Hasidah and is cause to decline the application or obligate Applicants to repay any funds received from Hasidah. Applicants agrees to indemnify and hold Hasidah harmless against any claim, demand, or recovery brought against Hasidah as publisher of the applicant's story with respect to any information applicant provides that is not complete, correct, accurate and truthful.
5. Applicants understand that they may be subject to a credit and background check to verify application information, and hereby consent to such credit and background checks.
6. Applicants grant permission to Hasidah to contact the treating physician and treatment provider(s) including clinics, labs, and pharmacies regarding application information, treatment and payment.
7. Applicants understand that Hasidah is not a medical organization, does not have medical expertise or give medical advice, and does not assume any risks for procedures that take place as a result of funding provided. The undersigned assume(s) all risk of injury or harm arising from any medical procedures that take place as a result of funding provided and agree(s) to releases, indemnify, defend and forever discharge Hasidah and its staff, employees and agents of and from all liability, claims, demands, damages, costs, expenses, actions and causes of action in respect of death, injury, loss or damage, howsoever caused, arising or to arise by reason of or during any procedures or other events that take place as a result of the funding provided.
8. All aspects of the program including without limitation the criteria for participation, the application and review process, funding provided and the methods used to publicize the



program are subject to change at anytime, without notice, in Hasidah’s sole discretion.
9. The laws of the State of Ohio shall govern this Agreement and any dispute arising under this agreement.

The undersigned applicants have read and understand the above authorizations, informed consents and releases and voluntarily grant the rights detailed to Hasidah in consideration for the opportunity to receive funding from Hasidah.

Signature of applicant 1	Date
Signature of applicant 2	Date

Please make sure to initial the first page of this and submit both pages.