



# Respiratory Therapy- Changing the Landscape of the Future 2015

*Share with us your photos showing respiratory care and/or patients depicting the following:*

- Compassionate Care
- Innovation
- Independence
- Technology
- *Be Creative!*
- *Deadline April 20, 2015*
- Final voting will take place at the May NSRC Conference in the Haymarket, Lincoln, NE



**GRAND Prize - 10-Pack  
Tickets to the College  
World Series**



**2nd Prize – \$50.00 gift card  
to LOWES**



- All winners and honorable mention photos will be displayed on NSRC-online.org website and at the conference.



# 2015 NSRC PHOTO CONTEST REQUIREMENTS

*Therapist or student photographer must be registered to attend  
any day or days of the Conference in Lincoln, NE*

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

Phone # \_\_\_\_\_

Address: \_\_\_\_\_

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

Description or title of photo:

Name(s) of person(s) in photo:

Signed release from individuals in the photo.

Jpeg format of photo (high resolution)

**Tips:** Check with your supervisor, teacher and/or marketing department to ensure you follow any facility guidelines. There may be a facility-specific consent form required. If not, there is one located on our website: <http://www.nsrc-online.org/>

**\*\*Submit the information requested above to: [nnathenson@madonna.org](mailto:nnathenson@madonna.org) \*\***



## Photographic Consent Form

I hereby consent to the collection and use of my personal images by photography

I acknowledge these may be used on the Nebraska Society for Respiratory Care's (NSRC) website, in newsletters and publications as well as distributed to members.

I further acknowledge that my image may be used by the NSRC to promote Respiratory Care in the future.

I understand that no personal information, such as names, will be used in any publications unless express consent is given.

I also understand that my consent can be withdrawn at anytime in writing to Nancy Nathenson, RRT @ 3000 South 17<sup>th</sup> St. Lincoln, NE 68502 or @ [nannathenson@aol.com](mailto:nannathenson@aol.com)

### CONSENT FORM

I .....  
Name of person giving consent & parent/guardian if under 18 years of age

Consent to the use of photographs for use on the Nebraska Society for Respiratory Care's (NSRC) website, in newsletters and publications as well as for distribution to members.

Consent to the use of photographs to promote Respiratory Care in the future.

I further understand that this consent may be withdrawn by me at anytime, upon written notice.

I give this consent voluntarily.

.....  
Signature of person giving consent                      Signature of parent/guardian < 18

Date .....