

Westchester County Board of Health
Dr. Harold Keltz Distinguished Public Health Service Award

2021 NOMINATION FORM

ELIGIBILITY: Nominees must live or work in Westchester County

CRITERIA: Nominee is a volunteer or organization whose efforts in response to the Covid-19 pandemic have made an extraordinary contribution to public health in Westchester

FILING DEADLINE: **February 9, 2021**

EMAIL OR SEND TO: Westchester County Board of Health
Public Health Awards
C/o Caren Halbfinger
Cqh4@westchestergov.com
Subject Line: 2021 Nomination

1. NOMINEE INFORMATION (Use N/A where not applicable) Email a jpeg color headshot and a completed photo release form signed by the nominee.

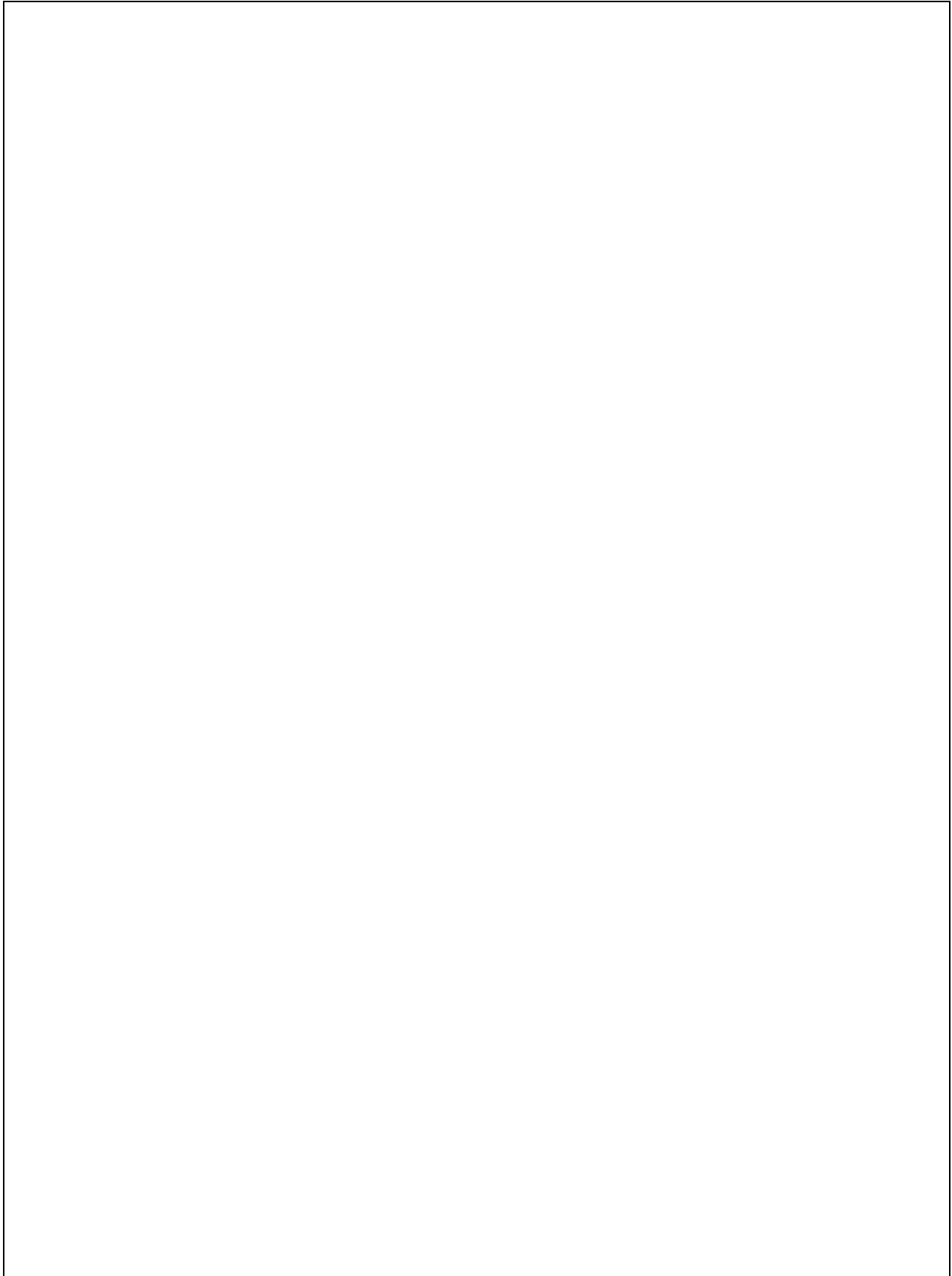
Nominee's name; if nominee is an organization, please also provide name of contact person	Title
Address	
Email	Phone
Funding Source	Partner Agencies

2. PUBLIC HEALTH CONTRIBUTIONS: Use this form or add attachments to describe the nominee's accomplishments and contributions to public health in Westchester in response to the Covid-19 pandemic. Attach multimedia examples and website links as needed.

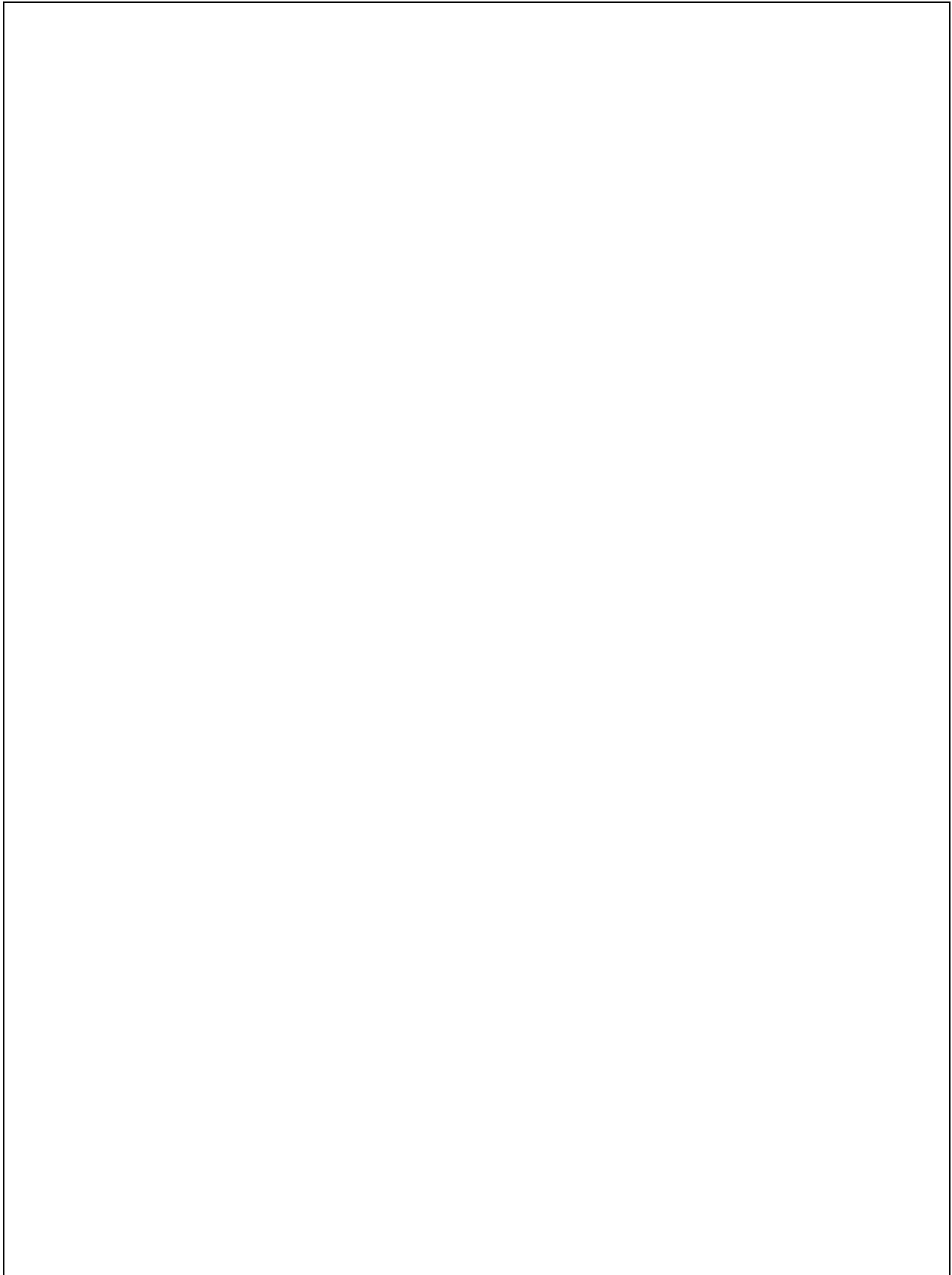
3. PERSON MAKING THE NOMINATION

Name	Agency (if applicable)
Address	Phone and email
Signature	Date

PUBLIC HEALTH CONTRIBUTIONS OF NOMINEE: Attach additional pages, multimedia materials/links/photos as needed.



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PUBLIC HEALTH CONTRIBUTIONS OF NOMINEE: Include details on the length and breadth of the individual or organization's commitment to this effort. Attach pages as needed.

A large, empty rectangular box with a thin black border, occupying most of the page. It is intended for the nominee to provide details on their public health contributions, as indicated by the text above it.



NAME: _____

ADDRESS: _____

PHONE: _____

In exchange for the opportunity to participate in a County of Westchester (the "County") project, the receipt of which opportunity shall be sufficient consideration for this consent and release, I do hereby:

1. grant full and unconditional permission to the County (i) to use my name; photographs of me, audio recordings of me, and/or video recordings of me; and anything else I provide to the County, intentionally or unintentionally, in the course of my participation in the County project in which I am to be involved (the "Project"), as well as use any and all other information provided to the County by me, (collectively, the "Materials") for any purposes whatsoever, on television, on the Internet, in print, or in any other media currently existing or hereafter developed, without notice and without further consideration or compensation, except where prohibited by law; and (ii) to edit, alter, distort, add to, rearrange and otherwise modify the Materials, and use the Materials in whole or in part or in combination with other materials;

2. grant full and unconditional permission to the County to publish, display, broadcast, distribute, reproduce, perform, create derivative works from, and otherwise use, the Materials on television, on the Internet, in print, or in any other media currently existing or hereafter developed, and without payment of any compensation to me or my heirs and successors, whether the Materials are used on their own or as part of any audiovisual or other production; used to advertise any products, programming, or services of the County; or used for any other advertising, marketing, publicizing, promotional or other purposes whatsoever;

3. acknowledge that I shall have no right of approval of any use of the Materials; and

4. release in perpetuity the County, its officers, employees, agents, and elected officials from any and all claims, demands, losses and liabilities of any kind whatsoever arising out of or in any way connected with the Materials and the use thereof as permitted hereunder, including, but not limited to, claims of false endorsement or infringement of rights of publicity or privacy, or any other personal and/or property rights.

I warrant that I am at least 18 years of age and that I have the full, complete and unrestricted right and authority to enter into this consent and release. I understand that I am under no obligation to provide this consent and release but am doing so freely and willingly. I understand that this consent and release, and my participation in the Project, does not obligate the County to make any use of any of the rights set forth in this document. I have read and understand all of the terms stated above.

Signature

Date

Michaelian Office Building White Plains, N.Y. 10601 (914) 995-2930 email cap3@westchestergov.com