

Photograph & Video Release Form

I hereby grant permission to the rights of my image, likeness and sound of my voice as recorded via audio or video without payment or any other consideration. I understand that my image may be edited, copied, exhibited, published or distributed and waive the right to inspect or approve the finished product wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of my image or recording. I also understand that this material may be used in diverse educational settings within an unrestricted geographic area.

Photographic, audio or video recordings may be used for the following purposes:

- conference presentations
- educational presentations or courses
- informational presentations
- on-line educational courses
- educational videos
- video production contests
- publication to websites
- broadcast television

By signing this release I understand this permission signifies that photographic or video recordings of me may be electronically displayed via the Internet. I understand that I may be identified via captions or graphics that will use my name in conjunction with pictures of video of me.

There is no time limit on the validity of this release nor is there any geographic limitation on where these materials may be distributed.

By signing this form I acknowledge that I have completely read and fully understand the above release and agree to be bound thereby. I hereby release any and all claims against any person or organization utilizing this material.

Student Name / Adult Name (if not a student) _____

Street Address/P.O. Box _____

City _____

Zip Code _____

Phone _____

Email Address _____

Signature _____ Date _____

If this release is obtained from a student under the age of 19, then the signature of that student's parent or legal guardian is also required.

Parent's Signature _____ Date _____