



Photograph and Video Release Form

PSPA would like to share your accomplishments with the journalism world. We would love to feature examples of excellent student work on our website and social media -- whether that be stories, photos, videos, artwork, captions, poetry, or script-writing. This form allows us to recognize your students for their talents, and more importantly, lets us use those pieces as educational tools to help our members grow.

I hereby grant the Pennsylvania School Press Association permission to the rights of my image, likeness, and the 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 videos |
| ● educational presentations or courses | ● video production contests |
| ● informational presentations | ● publication to websites |
| ● online educational courses | ● 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 are there any geographic limitations 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 _____