PHOTO & VIDEO RELEASE FORM

At various times throughout the _____, staff will be taking digital images,
(Name of Program/Activity/Camp)
photographs, and or videotapes of participants for educational, promotional, and informational purposes related to print material or the web.

I hereby grant permission to the University of Cincinnati ("University") and its representatives to take photographs, videos or recordings of my voice and to use, reproduce, and/or publish photographs, video, other digital representations, and/or audio that may pertain to me, including my image, likeness and/or voice.

I further hereby authorize the University to edit, alter, copy, exhibit, publish or distribute the images or recordings, for any lawful purpose, in any media now known or later developed, as the University deems fit.

I hereby waive any right to inspect or approve the use of the images or recordings. I also agree that by signing below I release the University and any and all of its representatives from any and all monetary obligations or payments to me or any of my authorized representatives for use of video, films, photographs, image, other digital representation and/or voice of myself.

I acknowledge that the University owns all rights to the images or recordings in any medium.

I hereby hold harmless, indemnify, release and forever discharge the University of Cincinnati and its representatives from all claims, damages, liability and causes of action arising from or related to the use of the images, recordings or materials, which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

I have read the above release and understand and agree to the terms of the document.

SIGNATURE

_____ _____

Participant's Signature Date

_____

Participant's Name (printed)

PARENT OR GUARDIAN OF A MINOR:
As parent or guardian of the above minor, my signature reflects my understanding and agreement for myself and on behalf of the minor to the terms stated above.

_____ _____

Parent's/Guardian's Signature Date

_____

Parent's/Guardian's Name (printed)