



Photographic Consent and Release Form

At various time 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 Fayetteville State University ("University") and its representatives to take photographs, videos or recording 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 authorized representatives for use of video, films, photographs, images, 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 Fayetteville State University and its representatives from all claims, damages, liability and cause of action arising form 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.

Participant's Signature: _____ Date: _____

Participant's Name (Printed): _____
PARENT OR GUARDIAN OF A MINOR:

Parent's/Guardian Name: _____ Date: _____

Parent's/ Guardian Name (Printed): _____

Program Manager Signature: _____ Date: _____