

## Photo/Video Release & Consent Form

I do hereby authorize Cameron University, including those individuals assigned to represent it, to use my name and photographic images or video footage of me taken on campus. These images may be used in projects including, but not limited to, printed materials, print and video presentations and social media or website. Photos may also be included in materials distributed to news media for information and public relations purposes.

These photographic/video images and related information shall be and remain the property of the Cameron University. Images of me may be used with or without identification. Neither the copy nor the edited photographs or video footage will be submitted to me for inspection or approval prior to distribution. I understand that I will not be compensated for use my image.

I agree that there is no cost to me for having my image used in these materials. I agree that there will be no cost to me for publication if images are used, and I understand and agree that I will not be compensated for supplying information or images, whether used or not.

I also agree to hold harmless Cameron University and its assigned representatives. I, the undersigned, do hereby consent to the above authorization and general release and that I have not given any person or firm the exclusive right to use my name, picture or any other information. There is no other agreement between us.

(Print full legal name)	(Age)
(Legal signature)	(Date signed)
If the individual is under age 18, a parent/guardi	an must sign the statement below:
I, the undersigned, being the parent or guardian of the above authorization and general release.	of the above-named minor, do hereby consent to
	(Printed full legal name)
	(Legal signature)
Dated signed:	