

VIDEO & PHOTOGRAPHY RELEASE FORM

In consideration of any engagement as a model and for other good and valuable consideration herein acknowledged as received, upon the terms hereinafter stated, I hereby grant Nova Southeastern University its legal representatives and assigns, those for whom Nova Southeastern University is acting, with their authority and permission, then absolute right and permission to copyright and use, reuse and publish, and republish video and/or or pictures of me, in whole or in part, or composite or distorted in character or form, without restriction as to changes or alterations, from time to time, in conjunction with my own or fictitious name, or reproductions thereof in color or otherwise made through any media at their studios or elsewhere for art, advertising, trade, or any other purpose whatsoever. I also consent to the use of any printed matter in conjunction therewith.

I hereby waive any right that I may have to inspect or approve the finished products or the advertising copy or printed matter that may be used in connection therewith or the use to which it may be applied. I hereby release, discharge and agree to save harmless Nova Southeastern University legal representatives or assigns, and all persons acting under their permission or authority or those for whom they are acting from any liability by virtue of any blurring, distortion, alteration, optical illusion, or use in composite form, whether intentional or otherwise, that may occur or be produced in the taking of said picture or in any subsequent processing thereof, as well as any publication thereof even though it may be subject me to ridicule, scandal, reproach, scorn and indignity.

I hereby warrant that I am of full age and have every right to contract in my own name in the above regard. I state further that I have read the above authorization, release and agreement, prior to its execution, and that I am fully familiar with contents thereof.

Signature of Individual Photographed/Recorded

Date

Printed Name of Individual Photographed/Recorded

NSU ID#

Project Contact Name

If individual photographed/recorded is under eighteen (18) years old, the following section must be completed: I have read and I understand this document. I understand and agree that it is binding on me, my child (named above), our heirs, assigns and personal representatives. I acknowledge that I am eighteen (18) years old or more and that I am the parent or guardian of the child named above.

Signature of Parent/Guardian of Individual Photographed/Recorded

Date

Printed Name of Parent/Guardian