



UNIVERSITY of ALASKA SOUTHEAST

Thank you for helping to promote the excellent programs and student experiences offered by the University of Alaska Southeast!

Consent to photograph, to audio and/or video record and release to the University of Alaska Southeast

I authorize the University of Alaska Southeast (UAS) to take photographs of me, make audio recordings of me, or video record me and to use the photographs, audio recordings and videos in any medium, including print and digital publications, slide presentations, social media applications, video productions, in advertising, on signs and in promotional materials.

I also give UAS permission to use my name, academic class standing, and my relationship with UAS (e.g., student, prospective student, visitor, faculty member or staff member) in print, or in an audio and/or video recording and on the Internet.

I agree that the photographs, recordings, and videos containing my image and/or voice are the property of UAS, and I hereby release UAS from all claims that I may have from the use of my image or voice.

I have read and understand the terms of this release.

Date: _____

EVENT TITLE OFFICE USE ONLY

Printed Name: _____

Signature: _____

If you are a minor (17 years old or younger), your parent or legal guardian must sign.

Printed name of parent or legal guardian: _____

Signature of parent or legal guardian: _____

Name of minor: _____



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