

iUTAH EPSCoR Photo Release Form

Participants in iUTAH EPSCoR events are sometimes photographed and videotaped for the use of iUTAH EPSCoR promotional and educational materials.

I hereby grant iUTAH EPSCoR permission to use my likeness captured in any photographs and/or voice related to my participation in iUTAH EPSCoR projects, research, or other iUTAH EPSCoR activities.

I understand and agree that these materials, taken in association with various student projects, will not be returned to me in any manner whatsoever.

I waive any right to royalties or other compensation arising or related to the use of the photographic images.

I hereby hold harmless and release and forever discharge iUTAH EPSCoR from all claims, demands, and causes of action 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 am 18 years of age and am competent to contract in my own name. I have read this release before signing below and I fully understand the contents, meaning, and impact of this release.

(Signature) (Date)

(Printed Name) (Date) (A Number)

If the person signing is under age 18, there must be consent by a parent or guardian, as follows:

If under 18 years of age:

I hereby certify that I am the parent or guardian of _____,
named above, and do hereby give my consent without reservation to the foregoing on behalf of this person.

(Parent/Guardian's Signature)

(Date)

(Parent/Guardian's Printed Name)