



Photo and Video Recording Release for Participating Adults

In consideration of the opportunity for me, _____ to participate in the Colorado State University (“CSU”) Program, I, the undersigned, give my permission for and grant CSU the irrevocable right to:

- Record my participation in the Program and appearance on video, audio, film, photograph, or any other media, whether now known or hereafter existing (the “Recordings”).
- Use my name, likeness, and/or voice in connection with the Recordings and in keeping with CSU policies and mission statement.
- Use, reproduce, distribute, publicly display and/or publicly perform the Recordings, either electronically or by any other media, whether now known or hereafter existing, and to allow others to do the same, my name, likeness, or voice, in whole or in part worldwide, without restrictions or limitations, in perpetuity, for any purpose related to CSU’s mission, including without limitation, promotional or educational.
- I agree to release CSU and its Board of Governors, officers, employees, students, volunteers, and agents from any liability to me, and on behalf of my heirs, executors, administrators, legal representatives, and assigns, based upon or arising out of use of my name, likeness or voice, or the Recordings.
- I agree to make no monetary or other claim against CSU for use of my name, likeness or voice, or the Recordings.

This release shall be governed in accordance with the laws of the State of Colorado.

I have read this Release Form and understand its terms. I sign it voluntarily and agree to be legally bound by its terms.

Participant’s signature: _____

Address: _____

Date: _____

Distribution:

Signed original(s) or executed electronic copies to be retained by the Program Director for 3 years after the end date of the program.