

PERSONAL IMAGE RELEASE FORM - ADULT

(to be completed by individuals 19 years of age and older)

I hereby grant to the Board of Regents of the University of Nebraska, its component campuses, its representatives, employees, agents and assigns, the irrevocable and unrestricted right to use, reproduce and publish photographs or video of me, including my image and likeness as depicted therein, for editorial, trade, advertising or any other purpose and in any manner and medium; to alter the same without restriction, and to copyright the same.

I hereby release the University of Nebraska, its component campuses and its Regents, officers, employees, agents, legal representatives and assigns from any and all claims, actions and liability related to its use of said photographs or video.

IN WITNESS WHEREOF, the undersigned, intending to be legally bound hereby sets their hand and seal the date written below.

Printed Name: _____

Date: _____

Signature: _____

CONTACT INFORMATION

Street Address: _____

City, State, Zip, Country: _____

Email Address: _____

Telephone Number: _____

PERSONAL IMAGE RELEASE FORM - YOUTH

(to be completed by parent/guardian if child is under 19 years of age)

I hereby grant to the Board of Regents of the University of Nebraska, its component campuses, its representatives, employees, agents and assigns, the irrevocable and unrestricted right to use, reproduce and publish photographs or video of my child/ward, including his/her image and likeness as depicted therein, for editorial, trade, advertising or any other purpose and in any manner and medium; to alter the same without restriction, and to copyright the same.

I hereby release the University of Nebraska, its component campuses and its Regents, officers, employees, agents, legal representatives and assigns from any and all claims, actions and liability related to its use of said photographs or video.

IN WITNESS WHEREOF, the undersigned, intending to be legally bound hereby sets their hand and seal the date written below.

Parent/Guardian Printed Name: _____

Parent/Guardian Signature: _____

Youth Printed Name: _____

Date: _____

CONTACT INFORMATION OF PARENT/GUARDIAN

Street Address: _____

City, State, Zip, Country: _____

Email Address: _____

Telephone Number: _____