



**Photographic/Film Consent & Release Form**

I hereby give my consent to \_\_\_\_\_  
\_\_\_\_\_ [production company, if applicable] and The Florida International University Board of Trustees ("FIU"):

- (a) to record my likeness and voice on a video, audio, photographic, digital, electronic or any other medium and to use my name in connection with these recordings; and
- (b) to use, reproduce, exhibit or distribute these recordings in whole or in part in perpetuity in any and all media throughout the universe (including but not limited to print publications, video tapes, non-theatrical, home video, CD-ROM, internet and any other electronic or other medium presently in existence or invented in the future) for any purpose that FIU, and those acting pursuant to its authority, deem appropriate, including promotional, recruiting, advertising and any commercial or non-commercial use.

I hereby release \_\_\_\_\_  
\_\_\_\_\_ [production company, if applicable] and FIU from and against any and all claims, demands, actions, causes of actions, suits, costs, expenses, liabilities, and damages whatsoever that I may hereafter have from liability for any violation of any personal or proprietary right I may have in connection with such use of my likeness, voice, or name in any medium, and expressly waive any rights to privacy I may have under the Family Educational Rights and Privacy Act ("FERPA") and/or §1002.22, Fla. Stat. I understand and agree that all such recordings, in whatever medium, shall remain the property of FIU.

**I have read and fully understand the terms of this release.**

Sign<sup>1</sup>: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

<sup>1</sup> Youth under 18 must have parental signature.