a place of mind
THE UNIVERSITY OF BRITISH COLUMBIA

Consent and Release for Models

I, the undersigned, in consideration of the sum of $_____ and other good and valuable consideration, including possible publicity, now paid to me, the receipt of which is acknowledged, hereby irrevocably agree that The University of British Columbia ("UBC") may use images of me (including any motion picture or still photographs made by UBC of my likeness, poses, acts and appearances or the sound records made by UBC of my voice) (the "Images") for any purposes in connection with promoting UBC and its activities (the "Purposes"), which may include advertising, promotion and marketing. UBC may crop, alter or modify the Images and combine the Images with other images, text, audio recordings and graphics without notifying me. I hereby waive any and all moral rights I may have in connection with the Images.

I release and waive any and all claims that I have or may have in the future against UBC, its board of governors, officers, employees or agents arising from or related to the use of the Images in accordance with this Consent and Release.

I understand that my personal information, including Images of me, is being collected for the Purposes. I consent to my name and any other information provided by me to UBC being displayed in connection with the appearance of my Image. I consent to any of my personal Information, including Images of me, being stored, accessed or disclosed outside of Canada.

Any questions about the videotaping, photographing and audiotaping should be directed to:
Name of coordinating UBC unit: (please print) _____

I am 19 years of age or older and am competent to sign this contract in my own name. I have read and understood this form prior to signing it, and am aware that by signing this consent I am giving permission to UBC to use my Image for the Purposes.

_____ Shoot date	_____ Shoot location
_____ Name (please print)	_____ Signature
_____ Email address (please print)	_____ Name of photographer (please print)
_____ Name of parent or guardian (please print) (if under 19 years of age)	_____ Signature of parent or guardian

This form is a legal document and is not to be altered in any way.
THIS FORM IS NOT TO BE USED FOR RECORDING FOR CURRICULUM OR TEACHING PURPOSES.