



PHOTO/VIDEO CONSENT FORM

I, the undersigned, am an adult and voluntarily consent to be photographed and/or video taped. I understand that the intended use of the photograph/video tape(s) is for publicity, education or public information efforts for Ivy Tech Community College for print and the Internet. I authorize any such use, by or on behalf of Ivy Tech Community College, of the photograph/video tape(s) and understand that I will not be paid or compensated by Ivy Tech Community College in any way for the taking or lawful use of any photograph/video tape(s).

I hereby release and discharge Ivy Tech Community College and its employees, agents and representatives from any claims, liability or results caused by the lawful use of said photograph/video tape(s) of me, which I have now voluntarily authorized as a gift to Ivy Tech Community College.

Printed Name: _____

Signature: _____

Phone Number: _____

Personal E-mail Address: _____

Date: _____