

## Photo and Video Release

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- Copyright the photographic or electronic records containing my image and/or communications in its own name or in any other name which it may choose;
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**By signing my name, I acknowledge that I have read, understand and agree with the contents contained within this form.**

Student Participant's

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

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

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

Signature of Student Participant: \_\_\_\_\_ Date: \_\_\_\_\_