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## WRITING, IMAGE AND AUDIO RELEASE

I hereby consent for Clackamas Community College and assigns including independent third party photographers hired by Clackamas Community College (hereinafter referred to as "the College") to record my written stories, my picture and voice on photographs, films and audio and videotapes, to edit these recordings at the discretion of the College, and to incorporate these recordings into movie and sound films or audio and videotapes, webcast, streaming, social media sites, broadcasts, (radio and television, including cable and satellite transmissions), websites, programs, billboards, or otherwise, to use in any manner of media whatsoever, including unrestricted use for purposes of publicity, advertising, and to use my name, likeness, or voice in connection therewith.

I hereby release the College from any and all liability, claims for damages, for libel, slander, invasion of privacy or any other claim arising on the use of the above-described materials or my appearance in the above described materials.

I hereby consent that the above described materials are the property of the College and further waive any rights conferred under federal copyright laws or any other rights I might otherwise have in the materials and the subsequent broadcast or commercial, educational, or other use.

I understand that the recordings are the exclusive property of the College, and the College owns all rights to these recordings regardless of the form in which they are produced or used.

Further, I agree that I am not entitled to nor was I promised any compensation for the making of such recordings or their use.

I have read and understood the contents of this release; wherefore, I executed this release on this \_\_\_\_\_\_day of \_\_\_\_\_\_, 20\_\_\_\_\_. Signatures made and transmitted by electronic means (e.g., by email, fax or scan) shall be deemed original and effective signatures.

By typing my name and returning this email, I accept all of the conditions set forth.

Name

Date

If under 18, the parent/guardian must sign below:

Name

Date

FOR STAFF

Date and Event Description: \_\_\_\_\_