

Video and Photograph Authorization

I, _____, hereby authorize The Trustees of the University of Pennsylvania ("Penn") and any authorized employee, agent or contractor of Penn to record, video and/or photograph my likeness and voice. **[OPTIONAL: I also consent to being interviewed and I authorize the use of any information disclosed during such interview].**

I understand that any such recording, videotape and/or photographs belong to Penn and that I will not receive any payment or other compensation in connection with such recording, video or photographs or for any use of them by Penn.

I hereby give Penn, its employees, agents, successors, assigns and those acting with its permission or on its behalf, the right and permission to use, copyright, publish, republish and distribute any such recording, video or photographs of me. I agree that Penn may use such recording, video or photographs, in whole or in part, in any manner and in any media, including in composite, altered, or distorted form. I understand that the uses may include, without limitation, reproductions on the World Wide Web. In conjunction with any printed or electronic matter, and in connection with any efforts publicizing, promoting or otherwise related to Penn. Further, I understand that such recording, video or photographs may be used in lectures, articles, textbooks and other educational materials prepared by or for Penn. I waive any right that I may have to inspect or approve the finished products or materials containing my likeness and/or voice, or the printed matter that may be used in connection with such recording, video or photographs.

Please check one:

_____ I am over the age of eighteen years and I have read the foregoing and fully and completely understand the contents.

_____ I represent that the subject of the photograph is a minor and that I am the parent/guardian of the minor and that I have read the foregoing and fully and completely understand the contents.

Signature, Subject of Photo (18 and older)

Date

Signature, Parent/Legal Guardian (if under 18)

Date

Subject's Name (please print)

Parent/Legal Guardian name (please print)

Phone: _____

Address: _____

Email Address: _____