



# Model Release

I give the University of Alaska Fairbanks Cooperative Extension Service (CES) permission to photograph, videotape or record me and to use the photographs, videotape, film or audio recording in print and electronic publications, video broadcasts, radio broadcasts or any similar electronic and mechanical means. I agree that the photographs, including negatives, slides and prints or any other presentation of the images, are the property of CES. I waive any right I may have to inspect and/or approve the finished product in which the images may be used. By signing this form I intend to release and discharge CES from any and all claims that I may have, and agree to hold harmless and defend CES from liability arising from claims or litigation arising from its use of my image or voice.

Date \_\_\_\_\_ Photo Tracking Number(s) (CES use only) - - - -

Printed Name (Please write legibly) \_\_\_\_\_

E-mail Address \_\_\_\_\_

Signature \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone \_\_\_\_\_

Signature of Parent or Guardian (if minor) \_\_\_\_\_



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