

**AUTHORIZATION AND CONSENT
TO
USE PHOTOGRAPH OR IMAGE**

This Authorization and Consent to Use Photograph or Image is given by the undersigned to the University of Central Arkansas ("University") for use by the University.

For purposes of this document, the term "University" shall include, but not be limited to, the University of Central Arkansas, the members of the Board of Trustees, its President, and all faculty, staff, employees or agents of the University of Central Arkansas.

As part of the University or matters in connection therewith, photographs, film, videos or other types of medium may be taken or used. In connection therewith, the picture (either still or in action) of the undersigned, or his/her child, may be taken.

Acknowledging the foregoing, the undersigned hereby gives consent and authorization to the University for the use the photograph, picture or image (either still or in action) of the undersigned and/or the undersigned's child in any publication, website, commercial, or other medium for or on behalf of the University or Institute, and waives and forever releases the University from and against any and all claims, demands or causes of action arising out of, or associated with, the University's use of the photograph, picture or image.

The authorization and consent granted herein shall continue in full force and effect until a written revocation is executed and delivered to the Division of University and Government Relations, University of Central Arkansas, 201 Donaghey Avenue, Conway, AR 72035.

A photocopy of this document shall be deemed to be an original. Before I signed this document, I was given the opportunity to read it. I was also given the opportunity to consult with any person, including an attorney, if I desired to do so. I have signed this document freely and voluntarily on the date set forth below.

Student's Name: _____

Signature of Parent or Guardian: _____

Signature of Student (if 18 or over): _____

Date: _____

Witness: _____