



PACIFIC LUTHERAN UNIVERSITY

PERSONAL RELEASE FORM

I (the undersigned) hereby grant Pacific Lutheran University (PLU) and its assigns and licensees to take photographs or videos of me, and to make recordings of my voice. I hereby grant to PLU, its successor, assigns and licensee the perpetual right to use these images, videos, and recordings, as well as my likeness, name, and voice, as follows:

- The use may include reproduction, distribution, derivative works, display, and performance.
- The use may be in composite or modified forms and in any media, now known or later developed, including without limitation newspapers, television, radio, the World Wide Web, and social media.
- The use may be for any purpose throughout the world and in perpetuity, including, without limitation, education, trade, advertising, and promotion.

I further acknowledge that I will not be compensated for these uses, and that PLU exclusively owns all rights to the images, videos, and recordings, and to any derivative works created from them. I waive the right to inspect or approve of the uses of any printed or electronic copy. I hereby release PLU and its assigns and licenses from any claims that may arise from these uses, including without limitation claims of defamation or invasion of privacy, or of infringement of moral rights or rights of publicity or copyright.

I hereby confirm that I am over eighteen (18) years of age. This Release is binding on me, my heirs, assigns, and estate. PLU is not obligated to use any of the rights granted under this Release. **This Release expresses the complete understanding of the parties.**

FULL NAME (PRINTED)

SIGNATURE

ADDRESS (STREET)

(CITY)

(STATE)

(ZIP)

EMAIL ADDRESS

PHONE

DATE

Pacific Lutheran University Representative

FULL NAME (PRINTED)

SIGNATURE

TITLE

DEPARTMENT

DATE