Media Consent and Release

In consideration of being permitted to participate in East Carolina University technology initiatives, such as video recordings on ECU-TV, I, the undersigned, do for myself, my heirs, and personal representatives, agree to hereby release, hold harmless, and discharge ECU, all of its officers, agents, and employees from and against any and all claims, actions, or causes of action, liability, and demands whatsoever that I or my representatives have or may have against any of them which result from causes beyond the control of, and without the fault or negligence of East Carolina University, its officers, agents or employees which stem from, arising out of, or in connection with the use of my photographic portraits, or pictures, name, likeness or voice), or any or all of them, either live or on archive video; telecast on cable or streamed on the internet, including without limitation any and all claims for defamation or invasion of privacy with my participation in the video recording. I understand that this consent may be revoked by notifying ECU-TV of the intent to do so. Such revocation will indicate the wish to not participate in the video recordings.

My signature below acknowledges my understanding that this involves the taping, broadcasting, and archiving of classroom sessions. I understand and consent that this information may be placed on a public web server with authentication for class viewing. I also understand and consent to the possibility that any broadcast and reproduction of any class session may be used without my prior examination and/or approval. I understand that by recording other people besides myself, that I am responsible for obtaining this media consent release form for each person in my media. In addition, I have informed each participant how the video will be used and stored.

In witness thereof, I have caused this Consent and Release to be executed this _____ day of ________________, 20__.

Witness: Participant (Parent or Guardian):

__________________________  __________________________
Signature                        Signature

Child’s name if applicable: ________________________________

Working Title of Project: ________________________________
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