



MEDIA RELEASE

I hereby grant Tallahassee State College ("College") the absolute and irrevocable right and permission, in respect to photographs, video, and/or audio recording ("Media") of me, to use, re-use, publish, and re-publish for any printed matter or electronic matter, in any and all media now or hereafter known, and for any purpose whatsoever; and to use my name in conjunction therewith if the College so chooses.

I understand and agree that such media of me may be placed on the Internet. I also understand and agree that I may be identified by name and/or title in printed, Internet or broadcast information that might accompany the media of me. I waive the right to approve the final product. I agree that all such media, and any reproductions thereof, and all plates, negatives, recording tape and digital files are and shall remain the property of the College.

I hereby release and discharge the College from any and all claims and demands arising out of or in connection with the use of the photographs or video, including without limitation any and all claims for libel or invasion of privacy.

I hereby release, acquit and forever discharge the State of Florida, the College, its current and former trustees, agents, officers and employees of the above-named entities from any and all claims, demands, rights, promises, damages and liabilities arising out of or in connection with the use or distribution of said media, including but not limited to any claims for invasion of privacy, appropriation of likeness or defamation.

I am of full age (18) and have the right to contract in my own name. If I am not yet 18 years of age, a parent or guardian has authorized my signature. I have read the foregoing and fully understand the contents thereof. This release shall be binding upon me and my heirs, legal representatives, and assigns.

Signature of Individual Photographed/Recorded

Date

Printed Name of Individual Photographed/Recorded

Signature of Witness

Date

If individual photographed/recorded is under eighteen (18) years old, the following section must be completed: I have read and I understand this document. I understand and agree that it is binding on me, my child (named above), our heirs, assigns and personal representatives. I acknowledge that I am eighteen (18) years old or more and that I am the parent or guardian of the child named above.

Signature of Parent/Guardian of Individual Photographed/Recorded

Date

Printed Name of Parent/Guardian

Signature of Witness

Date