Photo/Video Release Form for Minors

I understand the photograph(s) or video or audio recording(s) taken of me by agents, employees or representatives of Heartland Community College (hereinafter called “the College”) shall be used in connection with the College's dissemination of information by its public service and academic programs to the general public.

I hereby irrevocably authorize the College to copy, exhibit, publish or distribute any and all such images and audio of me or wherein I appear, including composite or artistic forms and media, for purposes of publicizing College programs or for any other lawful purpose. In addition, I waive any right to inspect or approve the finished product, including written copy, wherein my likeness appears.

I hereby hold harmless and release and forever discharge the College from all claims, demands and causes of action which I, my heirs, representatives, executors, administrators or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

I hereby certify that I am the parent or guardian of ________________________,

(Name of minor)

and do hereby give my consent without reservations to the foregoing on behalf of this person.

_________________________________   ____________________________________
(Date)   (Parent/Guardian’s Printed Name)

________________________________________________________________________
(Address)

________________________________________________________________________
(City, State, Zip Code)

_________________________________   ____________________________________
(Parent/Guardian’s Signature)   (Parent/Guardian’s Printed Name)