

## **Media Release**

## Instructions: Please review and indicate your agreement to this Release by signing below.

I hereby grant permission to Idaho State University (Idaho State) to use my name, image, voice, and likeness in all forms of physical and digital media for Idaho State's educational, marketing, and promotional purposes in perpetuity. Idaho State shall have the right to photograph, record, publish, re-publish, adapt, exhibit, perform, reproduce, edit, modify, make derivative works, distribute, display or otherwise use or reuse my name, image, voice and likeness in all markets, media, and technology now known or hereafter developed. Idaho State may exercise any of these rights itself or through any assignees, licensees, or other parties including other Universities.

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This Release is binding on me, my heirs, assigns, and estate. I understand Idaho State is not obligated to use any of the rights granted under this Release.

FULL NAME (PRINTED)	SIGNATURE		
ADDRESS (STREET)	(CITY)	(STATE)	(ZIP)
EMAIL ADDRESS	TELEPHONE NUMBER	DATE	

## If you are under eighteen (18) years of age, your parent or guardian must sign below:

I represent that I am a parent/guardian of the minor who has signed the above release and that in that capacity Idaho State has my consent and authorization to use the name, voice and/or likeness as described above.

## Parent/Guardian:

FULL NAME (PRINTED)	SIGNATURE		
ADDRESS (STREET)	(CITY)	(STATE)	(ZIP)
EMAIL ADDRESS	TELEPHONE NUMBER	DATE	