

UNIVERSITY of  
NORTHERN COLORADO



University Publications

**RELEASE AND WAIVER**

IF THE PARTY IS OF FULL AGE (18 for this contract purpose), complete the following down to the Consent section; otherwise, the parent or legal guardian must also sign

I, \_\_\_\_\_, do hereby give the University of Northern Colorado, its assigns, licensees, and legal representatives the irrevocable right to use my name (or any fictional name), picture, portrait or photograph in all forms and media and in all manners, including composite or distorted representations for advertising, trade or in any other lawful purposes, and I hereby forever waive any right to inspect or approve the finished product, including but not limited to, written copy and/or posting image on website, that may be created in connection therewith. I am of full age (18). I have read this Release and Waiver and am fully familiar with its contents. I understand that the University of Northern Colorado cannot control the use of my name or image once such name or image is published.

**I have had sufficient time to review and seek explanation of the provisions contained above, have carefully read them, understand them fully, and agree to be bound by them. After careful deliberation, I voluntarily and irrevocably give my consent and agree to this Release and Waiver.**

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 200 \_\_\_\_.

Signature of person whose printed name appears above.

Signature \_\_\_\_\_ Witness \_\_\_\_\_  
Address \_\_\_\_\_ Address \_\_\_\_\_  
Phone \_\_\_\_\_ City, State, Zip \_\_\_\_\_

**CONSENT**

If student is under the age of 18, his or her parent or legal guardian must also sign.

I, (printed name) \_\_\_\_\_, am the parent or legal guardian of the student who has signed above. I have read and understand the provisions of this document, I consent to the student participating as described above, and I fully enter into and agree to the above Release and Waiver and forever waive any rights therefrom.

\_\_\_\_\_, 200 \_\_\_\_  
Signature of Parent or Legal Guardian Date  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City, State, Zip \_\_\_\_\_

Edited November, 2000