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Media and Photo Release Form

Lake Superior State University maintains a database of photographs from campus events, activities and other university-related purposes. The University provides those photographs to the media and also uses them in publications, on their website and other publicity purposes for the University.

Please check one:

( ) I give Lake Superior State University, its employees, designees, agents, independent contractors, legal representatives, successors and assigns, and all persons or departments for whom or through whom it is acting, the absolute right and unrestricted permission to take, publish, edit, exhibit, display and/or copyright photographic images or pictures of me through any form of media (print, digital, electronic, video, television, internet, or otherwise) at any campus or elsewhere, for art, advertising, marketing, fund raising, publicity, archival or any other lawful purpose. I waive any right that I may have to inspect and approve the finished product that may be used or to which it may be applied now and/or in the future, whether that use is known to me or unknown, and I waive any right to royalties or other compensation arising from or related to the use of the image or product.

( ) I deny permission to Lake Superior State University to take and use my photo for university-related publications and media materials.

This Agreement shall be governed by and in accordance with the laws of the State of Michigan and venue for any action related to this Agreement shall be in the State of Michigan. I expressly agree that this Agreement is intended to be as broad and inclusive as permitted by the laws of the State of Michigan, and that if any portion herein is held to be invalid or unenforceable, the balance shall continue in full legal force and effect. I have carefully read this Agreement, understand the contents herein, and am executing it voluntarily of my own free will. I have had sufficient time to review and seek explanation of the provisions above, have carefully read them, understand them fully and agree to be bound by them. I certify that I am at least 18 years of age (or if under 18 years of age, that I am joined herein by my parent or legal guardian) and that this release is signed voluntarily, under no duress, and without expectation of compensation in any form now or in the future.

Participant Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

LSSU ID# (if applicable): \_\_\_\_\_

**IF STUDENT/PARTICIPANT IS UNDER EIGHTEEN (18) YEARS OF AGE, SIGNATURE OF A PARENT OR GUARDIAN IS REQUIRED.**

Parent or Legal Guardian Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_