

# DCI 180 2019

## PHOTO/AUDIO/VIDEO RELEASE AND CONSENT FORM

I, \_\_\_\_\_,  
*print participant name*

grant permission to \_\_\_\_\_  
*print student name*

the irrevocable and unrestricted right to reproduce the photographs, audio recording, and/or video images taken of me in any manner or in any medium for the purpose of a class assignment in Washington and Lee University's DCI 180 course.

I hereby release \_\_\_\_\_  
*print student name*

and their legal representatives for all claims and liability relating to said photographs, audio recording, and/or video images. Furthermore, I grant permission to use my statements, given during an interview, with or without my name, for the purpose of course work in Washington and Lee University's DCI 180 class without restriction. Additionally, I waive my right to any compensation.

I represent that I am over eighteen (18) years old and I waive any right to inspect, review, or approve any photographs, audio recording, and/or video images, as well as the use thereof.

I release Washington and Lee University, its trustees, officers, employees, and agents from any and all claims or liability related to the photographs, audio recording, and/or video images of me and the use thereof.

My signature below signifies that I have read, understood, and accepted the terms and conditions stated above and acknowledge that this Release and Consent shall be effective and binding upon me, my heirs, assigns, personal representative and estate and all members of my family.

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

Today's Date: \_\_\_\_\_