



IUP Community Music School

Photo-Video Release Form

Parent/Guardian of Student

I hereby consent to and authorize the use and reproduction by Indiana University of Pennsylvania and the IUP Community Music School, or anyone authorized by IUP, of any and all photographs and video that have been taken of me and/or my child(ren) while participating in the IUP Community Music School for any purpose, without compensation to me. IUP has permission to use my likeness and image in materials used to promote and market the university in perpetuity.

All negatives and positives, together with prints, slides, digital images, and video, etc., are owned by Indiana University of Pennsylvania and the IUP Community Music School, who reserve the right to use any of the material in any of its print or electronic publications.

Please check one:

I hereby acknowledge that I have read and understood the terms of this release and **DO** authorize the IUP Community Music School and IUP use of the images and video as indicated above.

I hereby acknowledge that I have read and understood the terms of this release and **DO NOT** authorize the IUP Community Music School and IUP use of the images and video as indicated above.

Student Name (print): _____ Age: _____

Parent/Guardian name (print): _____

Parent/Guardian Signature: _____

Address: _____

Date of Signature: _____