

# Standard Release Form

I (*please print*) \_\_\_\_\_, acting on behalf of  
(*please print minor's name*) \_\_\_\_\_, consent that any  
video tape, film, photography, and/or audio recordings taken of me this date by the  
University of Saint Francis, or any reproductions of same, become the sole property of  
USF, for the purpose of advertising, public relations, illustration, or publication in any  
manner, now and in the future, without further consent or consideration.

Furthermore, I hereby consent that, in consideration of receipt, any and all creative  
material (i.e., copywriting, calligraphy, illustration, photography, and slides, etc.)  
provided me to USF, this date or any reproductions of same, shall become the property of  
USF, for the purpose of advertising, public relations, illustration, or publication in any  
manner, now and in the future, without consent of consideration.

Mark one.

I hereby certify that I am at least eighteen years of age.

I hereby certify that I am legally empowered to authorize consent for this minor.

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

Printed Name of Participant: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

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Signature of Participant

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Signature of Parent or Guardian (If participant is under 18)