

THE STATE EDUCATION DEPARTMENT / THE UNIVERSITY OF THE STATE OF NEW YORK / ALBANY, NY 12234

OFFICE OF COMMUNICATION ROOM 124 EDUCATION BUILDING (518) 474-1201 (518) 473-2977

I, _______, authorize the New York State Board of Regents and the New York State Education Department (collectively "the Department") to take and use visual/audio images of me. Visual/audio images are any type of recording, including photographs, digital images, drawings, renderings, voices, sounds, video recordings, audio clips, accompanying written descriptions, and/or any other type of media now or hereafter known.

The Department may use and/or authorize the use of my video/audio images and/or my name in any manner or media without notifying me -- such as but not limited to, websites, publications, presentations, exhibitions, broadcasts, advertisements and/or posters. I waive any right to inspect or approve the finished images, prints, or any electronic matter that may be used with them. I agree that all visual/audio images connected therewith are and shall remain the property of the Department. I release the Department, its employees, officers, trustees, administrators, successors and assigns from any claims, damages, or liabilities which I may ever have in connection with the taking of or use of my visual/audio images and/or my name. I have read this release before signing it. I understand its content and I freely accept its terms.

Signature:_____

Date:_____

Please Print Name, Title, And Organization As You Wish To Be Represented In The Credits:	
Name:	
Title:	
Organization:	
Address:	
Street:	
City, State:	Zip Code:
Telephone:	