

## AUTHORIZATION AND RELEASE FOR IMAGE AND VOICE RECORDINGS

CBC Youth Program Participant Name:
CBC Youth Program Name:
I hereby voluntarily give full permission and consent without expiration to Columbia Basin College ("CBC") and those acting on its behalf to:
<ul> <li>a. Record and transmit my image, likeness, voice, and/or presentation on and/or in a photographic, video, audio, digital, electronic, or any other medium;</li> <li>b. Use, retain, reproduce, modify, exhibit, and/or distribute without restriction, any such recording or transmittal, in whole or in part, with or without my name, in any medium now known or hereafter developed including but not limited to digital photographs, video or digital moving images and/or voice recordings in material prepared for educational, research, or promotional purposes including but not limited to print media, newspaper, television, video, or Web site on the Internet.</li> </ul>
I waive any right to inspect or approve any such recordings, transmittals and uses. I understand that all such recordings, transmittals and uses in whatever medium shall remain the property of CBC.
I release and discharge CBC and those acting on its behalf from any claim or liability, including invasion of privacy, copyright, or defamation of character in connection with all such recordings, transmittals and uses.
I understand that no royalty, fee, or other compensation of any kind will be made to me for such uses.
I understand that consent to use of my likeness or voice recordings is not a condition of participating in the activity and that consent can be refused without any impact on my ability to fully participate in the program.
I understand that I can revoke this consent at any time upon written notice to CBC.
PLEASE COMPLETE THE SECTIONS BELOW
I agree I do not agree to the use of images or voice recordings as set forth above:

I am the parent/legal guardian of the minor named above and have the legal authority to execute

this release. I approve the foregoing and waive any rights regarding the foregoing matter.

To be completed by parent or legal guardian:

Signature:	Date:
Parent/Legal Guardian	
Print Name:	
Parent/Guardian Name	
Mailing Address:	
Walling Address.	
Email:	Phone: