

PHOTO / VIDEO USE RELEASE FORM

I, _____, hereby grant and authorize First Nations University of Canada the right to take, edit, alter, copy, exhibit, publish, distribute, and make use of all pictures or video taken of myself and or my minor child. I understand that these may be used in and/or for legally promotional materials including, but not limited to, newsletters, flyers, posters, brochures, advertisements, fundraising letters, annual reports, press kits, submissions to journalists, websites, social networking sites and other print and digital communications, without payment or any other consideration. This authorization extends to all languages, media, formats, and markets now known or hereafter devised. This authorization shall continue indefinitely unless I otherwise revoke said authorization in writing.

I understand and agree that these materials shall become the property of First Nations University of Canada and will not be returned.

I hereby hold harmless, and release First Nations University of Canada from all liability, petitions, and causes of action which I, my heirs, representative, executors, administrators, or any other persons may make while acting on my behalf or on behalf of my estate.

I warrant that I am of the age of consent (18 years of older) and that I am competent to contract in my own name. I have read this release before signing below and I fully understand the contents, meaning and impact of this release.

Child's Name

Date of Birth

Parent/Guardian Name (Printed)

Parent/Guardian Signature

Date