



## PHOTOGRAPHIC CONSENT AND RELEASE FORM

I hereby authorize BROWARD COLLEGE (“BC”) and those acting pursuant to its authority to:

- (a) Record my likeness and voice on a video, audio, photographic, digital, electronic or any other device or medium;
- (b) Use my name in connection with these recordings; and
- (c) Use, reproduce, exhibit or distribute in any medium (including but not limited to, print publications, video tapes, CD-ROM, Internet, social media, or any other medium) these recordings for any purpose that BC, and those acting pursuant to its authority, deem appropriate, including promotional or advertising efforts.

I release BC and those acting pursuant to its authority from liability for any violation of any personal or proprietary right I may have in connection with such use. I understand that all such recordings, in whatever medium, shall remain the property of BC, and that I will not receive any compensation for the use of such recordings. I have read and fully understand the terms of this release.

Name: \_\_\_\_\_

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

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

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

Parent/Guardian Signature (if under 18):

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