Information and Media Release Form

I hereby grant permission to _______ to photograph, record, and/or display my words and/or work for any educational purposes that comes from these information and media forms. I understand that the information and media gathered by the person named above, or portions thereof, may be used in a final written project and/or for public viewing as presentations.

I agree to my participation without financial remuneration, and I understand that this releases the person named above from any future claims arising from the use of the photographs/ recordings/interviews for educational purposes and/or public viewing.

| Name (Please print) | Signature | Media (photograph and interview, videorecording, etc.) | Date |
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