

Authorization to Reproduce Physical Likeness / Voice and or Name / Student Work For Educational, Marketing and Advertising Purposes

(Where practicable attach a copy of the visual / sound recordings approved by this authorization.)

	_	_
PRINT – First and Last Name of Individual	Parent/Guardian (If Individual under 18 years of age)	
x		
Address of Individual	Address of Parent or Guardian	
x		
Telephone Number of Individual	Telephone Number of Parent or Guardian	
REPROI	DUCTION RIGHTS	
I HEREBY GRANT TO THE UNIVERSITY OF AL third party as the University may authorize on its b	BERTA, including its employees, agents, assigns, or other behalf, the nonexclusive right to	
Photograph ME		
Make recordings of MY VOICE Make combined audio-visual recordings of MY VOICE	of ME and MY VOICE 🗾	
 Photograph and make recordings of MY ((specify) 🔽 Tea Time Talk on x	_(date
 Student work (specify type) 		_ _(title
materials, publications and websites and other co University of Alberta all rights to these audio and derived there from. Editing, publication, distribution	INGS BY THE UNIVERSITY OF ALBERTA for educational insistent purposes. I hereby assign and transfer to the visual recordings and all benefits and advantages to be in, broadcast and use of this material shall be at the sole in perpetuity or for the dates specified	
Intended uses:		
1. Archival and promotional purposes		
2.		
3.		
CONSENT TO	D DISCLOSE IDENTITY	
	MAY NOT be included in the resources listed below as gital format, including any authorized University of Alberta s effect when this agreement is signed.	
✓ FIRST AND LAST NAME ☐ FIRST	NAME ONLY SCHOOL OR BUSINESS	
X	X	
Signature of Individual (If over age 18)	Date	
Signature of Guardian (If Individual is under 18 years age)	of Date	
Protection of Privacy – The personal information req 33(c) of the Alberta Freedom of Information and Protect Act. It will be used for the purpose of educational, man	uested on this form is collected under the authority of Section ction of Privacy Act, and will be protected under Part 2 of that keting and/or advertising purposes as agreed to above. of this information should be directed to: [contact position, full	

This form will be placed on file in the coordinating office and retained in accordance with approved records retention schedules. Also note that consents may be revoked at any time by so indicating, in writing, to the office seeking consent.