

Permission to Photograph, Video Recording, Audio and/or Livestream

Soka University of America (SUA) requests permission to photograph, audio, video, and livestream recording of:

Performer/Lecturer's Name: _____

Event/Project Description: _____

Event/Project Start Date: _____ End Date: _____

Name of Event/Project Organizer at SUA: _____

____ Agree ____ Decline **Photograph:** The signatory recognizes that the images taken by the university photographers may appear publicly on the SUA website, SUA social media outlets, and other promotional materials. They may also be disseminated via news outlets. SUA retains the licensing, reproduction, and copyrights to all images created by university photographers. Permission to use these images by non-SUA entities must be obtained from the University Archives and Photography Office prior to any kind of public use, and commercial publication of these images by non-SUA entities such as in magazines or advertisements may require the payment of fees.

____ Agree ____ Decline **Private Video & Audio:** The signatory consents to reproduction by SUA of the video and audio recording of the event, in its entirety or in part, to be solely used by entities of SUA and/or for educational purposes. As an archival document, this recording may be viewed by individuals in a secure-access system. SUA Archives will duplicate footage for educational and archival purposes, including in-house reproduction, transcription, and preservation of the media to all formats now existing or developed in the future. SUA shall not grant duplication requests to non-SUA entities.

____ Agree ____ Decline **Public Video & Audio:** The signatory consents to the video and audio recording of the event being made available for viewing by the general public.

____ Agree ____ Decline **Live Stream:** The signatory consents to the event being livestreamed and having the recording be made available in its entirety for 30 days following the event for those who were unable to attend.

By signing below, the signatory has fully read and understood the terms of the consent as written above and has either accepted or declined to this engagement under these terms. By signing and consenting, the signatory does not expect, and will not receive compensation at any time for SUA's use of these photographs, video or audio recordings.

Please note additional restrictions not mentioned above:

Signature: _____ Date: _____