



STUDENT ROBOTICS

University of Southampton
Highfield
Southampton
SO17 1BJ
committee@studentrobotics.org

Media Consent Release Form

I the undersigned agree to be recorded and photographed, and hereby release Student Robotics, their agents, employees and successors from all claims, demands and causes of action of every nature and kind arising out of or connected with the recordings which you make of me.

I give my consent for you to use the images and sounds, to store, reproduce, publish and broadcast them in the manner and context and in conjunction with such sounds, images and captions as you deem fit. This includes, but is not limited to, publishing them electronically on DVD and on the Internet.

Print Participant's Name.....

Address.....

.....

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For participants over 18 years of age:

I am over the age of 18 and have read and agree to the above terms:

Signed

Date

For participants under 18 years of age:

I am a legal guardian of the participant named and have read and agree to the above terms on behalf of the participant:

Print Guardian's Name

Signed

Date