

**Media Release Form for SUU Story Project Submissions**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (please print), grant permission to Southern Utah University, it’s agents and employees, the irrevocable and unrestricted right to use my SUU Story Project which might include video/audio recording, including my name and voice, written work, artwork, photographs, and other media for educational, research, scholarly, and other non-commercial purposes of the University, including, but not limited to, exhibition, publication, presentation, and distribution in any medium and on the World Wide Web, and deposit in a permanent collection. I transfer and assign to Southern Utah University any right, title, and interest I may have in the project, including the copyright and any performance rights, and any right, title, and interest I may have in any works based upon, derived from, or incorporating my project. I irrevocably waive any right that I may have to inspect, edit, or approve the final version of this project in any of its forms. I irrevocably release to Southern Utah University, its employees, agents, and assigns, from any and all claims that I may have at any time arising out of, or related to, the material in this SUU Story Project submission or its/their use, including, but not limited to, any claims based on the right of privacy, libel, or defamation. Furthermore, I grant permission to use my statements from the audio or written portion of the project, with or without my name, for the purpose of advertising and publicity without restriction. I waive my right to any compensation.

**I acknowledge that I am [ ] over the age of 18  
[ ] the legal guardian of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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Name of Student

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Student/Legal Guardian

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Instructor

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Semester and Year