



PERSONAL IMAGE RELEASE FORM - YOUTH

(to be completed by parent/guardian if child is under 19 years of age)

I hereby grant to the University of Nebraska the irrevocable and unrestricted right to use, reproduce, publish and copyright photos and video recordings of my child/ward taken in the course of the 4-H activity; and to use such photos for any lawful purpose, in any manner or medium, and to alter the same without restriction.

I hereby release the University of Nebraska, its Regents, officers, employees, agents and assigns, from any and all claims, actions, and liability relating to the use of said photos and recordings.

IN WITNESS WHEREOF, the undersigned, intending to be legally bound hereby sets their hand and seal the date written below.

Parent/Guardian Printed Name _____

Parent/Guardian Signature _____

Youth Printed Name _____ Date _____

CONTACT INFORMATION OF PARENT/GUARDIAN

Street Address _____

City, State, Zip _____

Phone Number _____

Email Address _____

Appendix A: _____