USU Photo Opt-Out Release

| Activity: | Date(s): | |
|--|---|---------------------------------|
| Activity: Date(s): Please complete and return this form ONLY if you do NOT wish for USU Extension to record your participation and photograph in any recorded format or medium. | | |
| This Photo Opt-Out Release must accompany the a Service Agreement) for your ACTIVITY. This Photo-ACTIVITY, up to 12 months from the date of signatucurrent photo accompany this form, so that it may b ACTIVITY for the purpose of excluding your likenes | Opt Out Release is applicable and ure for on-going ACTIVITY. It is sugged to the recorded media | valid for this gested that a |
| I, the undersigned, do not wish the University to record my participation and photograph in any recorded format or medium including, but not limited to, video, audio, photos for use in any form (including, but not limited to, print, websites, blogs, social media, and internet). I understand the University will make reasonable efforts to comply with my request. If I become aware of a recording with my likeness, I will notify the University contact for the ACTIVITY. I understand that the University will then make reasonable efforts to remove my likeness from recordings. | | |
| I hereby confirm that I am of legal age (18 or older) and have every right to contract in my own name. I further affirm that I have read the above Photo Opt-Out Release and agree with its contents. | | |
| Name (Please Print): | Telephone Number: | |
| Address: | City: | _ State: |
| Signature: | Date: | |
| Please sign and return this completed form to the local USU Extension Office. | | |
| REQUIRED FOR ALL PARTICIPANTS UNDER 18 YEARS OF AGE | | |
| I hereby confirm that I am the parent or legal guardian of the above-named participant. On behalf of myself and my spouse, partner, co-guardian or any other person who claims the participant as a dependent, I have read the above Photo-Opt Out Release and agree with its contents. | | |
| Parent or Guardian Signature: | | |
| Date: | | |
| Note: Complete a new form every 12 months for on going ACTIVITY, when participating in a different ACTIVITY, or when the ACTIVITY changes. | | |
| This form is to remain in the department where the ACTIVITY is being performed and be kept in accordance with USU retention requirements. | | |

UtahStateUniversity EXTENSION MASTER GARDENERS