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Office of Public Affairs

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I hereby give SMU and its employees the absolute right and permission to publish, at any time in the future, photographs, videotapes, or other media containing my likeness or in which I may be included in whole or part, with or without my name, for any editorial, promotional, advertising, Web/Internet, or trade purposes of Southern Methodist University. I hereby waive any right I may have to inspect and/or approve the finished product or advertising copy that may be used in connection therewith, or the use to which it may be applied. I release SMU and its trustees, officers, employees, and representatives from any liability whatsoever by virtue of any form of optical, compositional, or composite distortion that may occur while taking, processing, composing, editing, reproducing, publishing, or displaying said photographs or images. I am at least 18 years of age.

NAME _____ DATE _____

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TELEPHONE _____

SIGNATURE _____

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PHOTOGRAPHER _____ DATE _____

PUBLICATION _____ LOCATION _____

NOTES _____



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PARENT/GUARDIAN SIGNS
IF STUDENT IS YOUNGER THAN 18 YEARS OF AGE

PUBLICATION CONSENT AND RELEASE OF LIABILITY FORM
(PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING)

I, _____, the parent/guardian of a student enrolled at Southern Methodist University (“SMU”), hereby acknowledge that I freely and voluntarily agree to give SMU and its agents or employees the absolute right and permission to photograph and publish, or cause to be published, at any time in the future, photographs, video-tapes or other media that contain my child’s likeness, in whole or in part and with or without my child’s name, in the context of any SMU-related event for any SMU-related editorial, promotional, educational, advertising, or trade purposes. Furthermore, I hereby waive any right I may have to inspect and/or approve any such future publication. In consideration for SMU allowing my child to participate in the event and/or witness any such photographing, video-taping or other media production and for other good and valuable consideration, receipt of which I acknowledge, I hereby execute the Release of Liability with the intent to bind myself, my spouse (if applicable), my heirs, assigns and legal representatives. I further represent that I am at least 18 years of age and that I am competent to sign this affirmation and release.

I EXPRESSLY AGREE AND INTEND THAT NEITHER SMU, ITS TRUSTEES, OFFICERS, EMPLOYEES, STUDENTS, AGENTS NOR ASSIGNS SHALL BE LIABLE FOR ANY INJURIES, DAMAGES, CLAIMS, DEMANDS ACTIONS OR CAUSES OF ACTION WHATSOEVER THAT MAY ARISE OUT OF OR HAVE A CONNECTION WITH ANY PHOTOGRAPHING, VIDEO-TAPING OR FUTURE PUBLICATION OF MY CHILD’S LIKENESS IN THE CONTEXT OF AN SMU-RELATED EVENT, WHETHER FROM ACTS OR ACTIVE OR PASSIVE NEGLIGENCE ON THE PART OF SMU OR ITS TRUSTEES, OFFICERS, EMPLOYEES, STUDENTS, AGENTS OR ASSIGNS, AND I DO HEREBY AGREE TO FOREVER RELEASE, DISCHARGE, INDEMNIFY, HOLD HARMLESS AND DEFEND SMU, ITS TRUSTEES, OFFICERS, EMPLOYEES, STUDENTS, AGENTS AND ASSIGNS FOR ANY SUCH INJURIES, DAMAGES, CLAIMS DEMANDS, ACTIONS OR CAUSES OF ACTION.

The laws of the State of Texas govern and construe the terms of this Release of Liability. I agree that exclusive venue for any dispute that may arise between SMU and me involving the Release of Liability in any way shall be Dallas County, Texas.

ACCEPTED AND AGREED:

Parent’s/Guardian’s Signature

Date

Student’s Printed Name

SMU ID

Student’s Address

Student’s Phone Number