



STIFEL



# Oregon Rotary Model United Nations Photo and Video Release Form

Instructions: Complete this form either on the computer or by hand, print and sign by hand, and then scan and email the fully completed form to [modeluneugene@gmail.com](mailto:modeluneugene@gmail.com).

Event Sponsor: Rotary Club of Eugene and Stifel  
Name of Event: Oregon Rotary Model United Nations  
Date of Event: January 2020 through April 2020

Student Name:

Student Address:

Student Email Address:

Student Telephone Number:

Alternate Contact Number:

Parent or Guardian Name:

Parent or Guardian Address:

*(if different from student)*

Parent or Guardian Email Address:

Parent or Guardian Telephone Number:

I hereby grant permission to the rights to my image, likeness and sound of my voice as recorded on audio or video tape in connection with Oregon Rotary Model United Nations events without payment or any other consideration. I understand that my image may be edited, copied, exhibited, published or distributed and waive the right to inspect or approve the finished product wherein my likeness, image or sound of my voice appears or is replayed. Additionally, I waive any right to royalties or other compensation arising or related to the use of my image or recording. I also understand that this material may be used in diverse educational settings within an unrestricted geographic area.

I understand that my image, likeness and sound of my voice may be used for, but not limited to, the following purposes: Conference presentations; training presentations; informational presentations; and on-line and other promotional materials.

By signing this release I understand this permission signifies that photographic or video recordings of me may be electronically displayed via the Internet, DVD or any media, in the public educational setting and/or in promoting our Rotary Model UN Program. I will be consulted about the use of the photographs or video recordings for any purpose other than those listed above. There is no time limit on the validity of this release nor is there any geographic limitation on where these materials may be distributed. This release applies to photographic, audio or video recordings collected as part of the sessions listed on this document only. By signing this form I acknowledge that I have completely read and fully understand the above release and agree to be bound thereby. I hereby release any and all claims against any person or organization utilizing this material for educational purposes.

Student Signature:

Date:

Parent/Guardian Signature:

Date: