**Marketing and Media Consent Form**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthdate: \_\_\_\_\_\_\_\_\_\_\_\_

I hereby authorize and give consent for Indiana State University (“ISU”) to collect and use photographs, audiovisual recordings or other representations of me for use in marketing, promotional or other fundraising materials.

I understand that these representations may be released and used by ISU in broadcast, print or internet/social media as long as this consent is in effect and ISU has not received written notification that this consent has been revoked.

ISU and its trustees, officers, employees and agents are released from any and all liability connected with the capture or use of these representations and all rights, interest or claims for payment in connection with any exhibition or use of the representations is also waived.

I understand that this consent is voluntary and may be revoked at any time by providing written notice to ISU.

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

Signature

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Printed Name Address

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Witness Signature City State Zip Code

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Printed Name Date