



College of Fine Arts

School of Theatre - Photo Release Form

I _____(PHOTOGRAPHER) grant permission to Boston University College of Fine Arts School of Theatre (SOT) to use the images _____(IMAGES) I have given to them of _____(NAME OF PLAY) on any and all BU websites, electronic or print publications, and on commercial retail products marketed under the BU name (such as books CD's or DVD's).

I grant the SOT the rights to use these images on a non-exclusive royalty free basis in perpetuity. Nothing herein shall be construed to restrict or prohibit the PHOTOGRAPHER from entering into similar agreements with other persons or organizations.

SOT agrees to credit the PHOTOGRAPHER on all reproductions of the images larger than thumbnail size by showing the photographers name with © designation in one of three locations: directly on the image, on a roll-over of the image, or in text on the same page as the image.

PHOTOGRAPHER's signature on this form signifies full acceptance of this agreement.

Photographer Signature:

Date:

Photographer Name (printed):

Photographer Address:

Photographer Phone Number:

Photographer E-Mail:
