

**Film, Videotape, and/ or Photograph Consent Form  
Montana State University**

I (the undersigned) do hereby irrevocably grant to Montana State University, its officers, agents, employees, students, assigns, and licensees, [hereinafter referred to as MSU] the absolute right and permission to record my likeness and/or voice with still photography, film, videotape, digital recording or storage device and to edit such still photographs, film, videotape, or digital files at MSU's discretion, to incorporate the same into photo exhibits, motion picture films, video presentations, PowerPoints, websites, and other public and academic presentation and to use or authorize the use of still photographs, films, and/or videotapes or digital files or any portion thereof, in any manner at any time or times throughout the world in perpetuity, to copyright, use, reuse, publish, republish, exhibit, display, print, and reprint in advertising, publicity or promotional material, magazines, books, or any other media now known or yet to be developed along with the right to use my name, likeness, and biographical and other information concerning me in connection with the exhibition, advertising, exploitation, promotion, website and internet distribution or any other use of such still photographs, films, and/or videotapes or digital files.

I hereby waive any right to inspect or to approve the still photographs, films, and/or videotapes, digital files or presentations or the editorial or printed matter that may be used in conjunction therewith. I further waive any claim that I may have with respect to the eventual use to which they may be applied. Such still photographs, films, and/or videotapes, or digital files may be used at MSU's sole discretion, with or without my name, alone or in conjunction with any other material of any kind or nature.

I further expressly agree that the foregoing release is intended to be as broad and inclusive as is permitted by the law of the State of Montana and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

I acknowledge that I have read this document and understand its terms. I am signing the release freely and voluntarily.

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

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Parent/Guardian if Minor: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip Code: \_\_\_\_\_