



The University of New Mexico
Consent to Photograph/Video Record

Date: _____

I, the signed below, do hereby give The University of New Mexico and its designates the irrevocable right to use photographs of me, and or my property, my name (or any fictional name), picture, portrait, or photograph in all forms and media and in all manners, including composite or modified representations, for advertising, trade or any other lawful purposes, without further compensation to me, and I waive any right to inspect or approve the finished version(s), including written copy that may be created and appear in connection therewith. All negatives, positives, and digital files, together with the prints shall constitute The University of New Mexico's property, solely and completely. I am of full age. I have read this release and am fully familiar with its contents.

Adult 1

Participant's Name (Printed): _____ Participant's Signature: _____

Participant's Email Address: _____ Participant's Phone Number: _____

Adult 2

Participant's Name (Printed): _____ Participant's Signature: _____

Participant's Email Address: _____ Participant's Phone Number: _____

Adult 3

Participant's Name (Printed): _____ Participant's Signature: _____

Participant's Email Address: _____ Participant's Phone Number: _____

Adult 4

Participant's Name (Printed): _____ Participant's Signature: _____

Participant's Email Address: _____ Participant's Phone Number: _____

Adult 5

Participant's Name (Printed): _____ Participant's Signature: _____

Participant's Email Address: _____ Participant's Phone Number: _____

Adult 6

Participant's Name (Printed): _____ Participant's Signature: _____

Participant's Email Address: _____ Participant's Phone Number: _____