



MEDIA RELEASE FORM

I understand the photograph(s) or video or audio recording(s) taken of me by agents, employees or representatives of the LSU AgCenter and its Louisiana 4-H Youth Development Program (hereinafter called "the Agency") shall be used in connection with the Agency's dissemination of information by its public service and academic programs to the general public.

I hereby irrevocably authorize the Agency to copy, exhibit, publish or distribute any and all such images and audio of me or wherein I appear, including composite or artistic forms and media, for purposes of publicizing Agency programs or for any other lawful purpose. In addition, I waive any right to inspect or approve the finished product, including written copy, wherein my likeness appears.

I hereby hold harmless and release and forever discharge the Agency from all claims, demands and causes of action which I, my heirs, representatives, executors, administrators or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization, including claims arising from agencies negligence.

Printed Name

Date

Member Signature

Parish

Street Address

City/State/Zip Code

(If the person signing is under age 18, there should be consent by a parent or guardian, as follows:)

I hereby certify that I am the parent or guardian of _____, the minor named above, and do hereby give my consent without reservations to the foregoing on behalf of this person.

Parent/Guardian Name

Date

Parent/Guardian Signature

Louisiana 4-H is an open and inclusive youth development program. If specific accommodations are needed for a child with physical, learning or psychological needs under the Americans with Disabilities Act (ADA), please visit LSUAgCenter.com for more information.