



## Consent to Use my Likeness, Image, Picture, Name and Written/Oral Statements

Name (Please Print: \_\_\_\_\_

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

Email address: \_\_\_\_\_

Telephone: \_\_\_\_\_

ACC Major/Program/Department: \_\_\_\_\_

I understand that Austin Community College District ("ACC") strives to use authentic images of students and community members to promote the College and its programs. I wish to assist in these efforts and hereby grant ACC the following permissions:

1. I permit ACC and its authorized agents to use, re-use, publish, and re-publish, in any medium, in whole or in part, without restriction as to changes or alterations, photographs, images, film or video footage of me, or other representations of my likeness in any medium whatsoever, individually or in groups in which I am include.
2. I permit ACC and its authorized agents to use my name and/or major.
3. I permit ACC to use written statements or quotes that I may provide to them about ACC and my experiences there.

### ***In signing the Consent I understand and acknowledge that:***

- *My photograph, image, film or video footage of me or other representations of my likeness, as well as my name or statement may be used for ACC purposes in print publications, online publications, presentations, websites, social media, film, video, ACCTV broadcast, or other electronic communication productions for instructional, informational, promotional, or other purposes.*
- *I will not receive any remuneration for the use of my name, photograph, or quote, and understand that no royalty, fee or other compensation shall become payable to me by reason of such us.*
- *I release ACC District's trustees, president, appropriate vice presidents and other administrators, faculty members, and staff from liability for any claim or course of action resulting from or in any way related to the use or publication of such photographs or statements.*
- *Said material is the sole property of ACC or its assignees. ACC will retain full copyright over the work that features the individual or talent.*

- *I have read this Consent in its entirety and understood it prior to executing it.*
- *EXCLUSIONS (please state specific exclusions where you will not release the use of your photo):*

\_\_\_ *I am over 18 years of age and otherwise legally competent to sign this Consent.*

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

**If the person photographed/videotaped is under 18 years of age, the parent or guardian must also consent as follows:**

I hereby certify that I am the parent or guardian of the participant named above. I have read and understand the terms of this agreement and grant ACC all of the permissions listed above.

Signature of parent or guardian: \_\_\_\_\_ Date: \_\_\_\_\_

**Office of College Relations & Marketing**

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