



University of Iowa Talent Release Form ITS Video Services

DATE: _____

I, _____, hereby certify that I am of legal age and have every right to contract in my own name. I consent that still/film photography and/or electronic media recording made of me by The University of Iowa may be used for broadcast on The University of Iowa Cable television channel (UITV) and may be distributed on this channel without any compensation to me.

In addition, these images may be distributed on an Iowa Public Television broadcast channel in the state of Iowa as part of the "Intelligent Television" service.

UITV will not make duplicates, copies, clones or web distributed products of these images without additional consent from me. (Option noted below).

I hereby release The University of Iowa, the State of Iowa, the Iowa Board of Regents State of Iowa, their employees and agents and any publisher of the materials (and their respective licensees and assigns) that include the above mentioned recordings, from any claims arising out of, or related to, any publication, distribution, broadcast transmission, or any other use of such materials.

Opt-in: In addition to broadcast, The University of Iowa may also distribute this material via the world-wide-web, as a static or streamed product.
(please check box and initial) _____

Opt-out: I do not wish to have these materials distributed statewide on Iowa Public Television.
(please check box and initial) _____

(signed)

Address: _____

Telephone: _____

(witnessed)