
Release form for electronic, print, and video
Regional Educational Technology Assistance Program and NMSU

Participant _____ Age _____

Name of Parent or Guardian _____

Address _____

City _____ State _____ Zip _____

Home phone _____ Work phone _____

Email: _____

Permission for release (check all that apply)

I, parent/guardian of _____, consent that photographs, motion pictures, videos, curriculum or other written material, or other audio or visual images (Specify other below)

I consent that my photographs, motion pictures, videos, curriculum or other written material, or other audio or visual images (Specify other below)

may be used by the Regional Educational Technology Assistance Program (RETA) at New Mexico State University (NMSU) for professional development workshops, the non-profit, educational website, and for dissemination in brochures and other promotional material, including television, print, or for electronic purposes. This includes posting these photographs, motion pictures, or video images of the event on affiliated RETA web sites.

RETA's policy to acknowledge the source of all materials not created by RETA staff applies to these materials.

Furthermore, I consent that such photographs, film, video recordings, videotapes, or other audio or visual images, may be used free and clear of any claim whatsoever on my part.

Signature _____

Parent/Guardian Signature _____

Name _____

Date _____