

## Release and Authorization

for use of information

I, \_\_\_\_\_\_, in consideration of any photograph, video image or other likeness of me and information about me, said information consisting of the following: \_\_\_\_\_\_ (all such photographs, etc., hereinafter collectively "my information"), hereby authorize Murray State University and its employees, agents, personnel and any others who are acting on its behalf (hereinafter collectively "Murray State") to use my information for any and all purposes whatsoever. I understand that my information may be copied and distributed by Murray State using any means, including but not limited to video presentations, television, news bulletins, billboards, signs, brochures, magazines, websites, digital materials, social media platforms and newspapers. I understand and agree that when Murray State uses my information, others who are not subject to Murray State's supervision and control may further disseminate my information. I release Murray State from any and all liability related to dissemination of my information. I specifically allow release of my information that is subject to the Family Educational Rights and Privacy Act (FERPA), 20 U.S.C. § 1232g, et seq., and other statute, rule or regulation.

Dated \_\_\_\_\_\_ Signature of subject \_\_\_\_\_

Dated \_\_\_\_\_\_ Signature of Murray State representative\_\_\_\_\_

I have read this document and understand its contents.