



LAMAR UNIVERSITY

MEMBER THE TEXAS STATE UNIVERSITY SYSTEM™

TESTIMONIAL / PHOTO RELEASE

The undersigned, being of full and legal age, does hereby agree and consent that Lamar University, its successors, legal representatives and assigns may use and reproduce my name, address, photograph and/or movie film, video tape recordings or audio tape recordings of myself, biographical and educational information and/or statements; and circulate, use, publish, broadcast and otherwise distribute the same for any and all purposes including advertising, publications and other purposes of trade without limitation and/or compensation to me. The agreement also includes authorization of same for my minor children, if applicable, and includes permission to quote all or part of my statement (with the privilege of editing or rearranging but not changing the original meaning). This release includes the recording of properties owned or managed by me.

The undersigned, by the signing of this testimonial, and named person or persons, firm or corporation of, hereby exempt Lamar University from any and all liability growing out of the use of my name and names of my minor children, if applicable, address and photograph or photographs, movie film, video tape recordings or audio tape recordings.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ Hometown: _____

Email: _____

Classification: [] Freshman [] Sophomore [] Junior [] Senior Other: _____

Student's Signature: _____ Date: _____

Parent's Signature (if under 18): _____ Date: _____