

STATE OF SOUTH CAROLINA
COUNTY OF HORRY
COASTAL CAROLINA UNIVERSITY

MEDIA
RELEASE
FORM

Please read carefully. You are releasing certain rights.

I hereby authorize Coastal Carolina University and those acting pursuant to its authority to:

- a. record my participation, image, and/or appearance on video, audiotape, film, photograph or any other medium, including print and electronic communications;
- b. use my name, likeness, image, voice and biographical material in connection with these recordings and/or images;
- c. exhibit or distribute, and modify such recordings and/or images in whole or in part without restrictions or limitation for any educational or promotional purpose that the University and those acting pursuant to its authority may deem appropriate.

I have read this authorization and it is freely given by me without expectation of any compensation whatsoever.

Signature

Print name

Parent/guardian signature (if under 18)

Print street address

City, State, Zip code

Date

Telephone

University contact person on site

Event

Please return this form to the Office of Marketing Communications, Singleton 204, P.O. Box 261954, Conway, SC 29528-6054; telephone: 843.349.2244. Thank you.

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