



4-H FLIX VIDEO CONTEST MEDIA RELEASE

Name/Title of Video _____ County _____

I authorize 4-H to record the individual's (named below) image and/or voice for use by the University of New Hampshire, its affiliates (including but not limited to the UNH Cooperative Extension, UNH Foundation, and 4-H Foundation of New Hampshire), or its assignees in research, educational and promotional programs. I understand and agree that these audio, video, film, and/or print images may be edited, duplicated, distributed, reproduced, broadcast and/or reformatted in any form and manner without payment of fees, in perpetuity.

Duplicate as necessary to ensure you have a parent/guardian signature for every person who appears in your video.

1 *Name of youth:* _____ *Date:* _____

Signature of parent/guardian: _____ *Please print name:* _____

2 *Name of youth:* _____ *Date:* _____

Signature of parent/guardian: _____ *Please print name:* _____

3 *Name of youth:* _____ *Date:* _____

Signature of parent/guardian: _____ *Please print name:* _____

4 *Name of youth:* _____ *Date:* _____

Signature of parent/guardian: _____ *Please print name:* _____

5 *Name of youth:* _____ *Date:* _____

Signature of parent/guardian: _____ *Please print name:* _____