

**Western Illinois University**  
**MODEL RELEASE FORM**  
**Minor Students**



I, \_\_\_\_\_, do hereby give Western Illinois University its assigns, licensees, and legal representatives the irrevocable right to use my child, \_\_\_\_\_, (or any fictional name), picture, portrait, photograph, and/or video image in all forms and media (including the Internet) by Western Illinois University, and I waive any right to inspect or approve the finished version(s), including written copy that may be created in connection therewith. I have read this release and am fully familiar with its contents.

Student Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

E-mail \_\_\_\_\_

Elementary/Jr. High/High School \_\_\_\_\_

Year in School \_\_\_\_\_

**ADULT CONSENT REQUIRED (IF UNDER 18)**

I am the parent or guardian of the minor named above and have the legal authority to execute the above release.

I approve the foregoing and waive any rights in the premises.

Parent/Guardian Name (printed) \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Mailing Address \_\_\_\_\_

E-mail \_\_\_\_\_

Date \_\_\_\_\_