

Talent and Performance Release Form

CONSENT

I, hereby consent to be photographed, recorded and/or filmed by the University of Wollongong (“UOW”) on the following terms:

1. UOW will own any and all rights in the photography, recording or filming;
2. I hereby consent for UOW and/or its representatives, agents and related entities to Use any photographs, film, videos or audio recordings of my Appearance for promotional, commercial, and marketing purposes, whether or not accompanied by any narration or dialogue, by any present or future media or means known or unknown.
3. I consent to the Use of any printed material in conjunction with the abovementioned Use;
4. I hereby waive all personal rights and objections to, including the right to inspect, any Use which will be made of my Appearance by UOW;
5. I hereby waive, release and forever discharge the UOW and all persons acting under its permission or authority from all claims, actions and liability relating to use of the said photographs, videos or audio recordings;
6. I understand that I will not receive any compensation or payment or any form of remuneration now or in the future in consideration for the above consent; and
7. I acknowledge that images of my Appearance may be transferred outside Australia and stored and processed overseas.

DEFINITIONS

- (a) **Appearance** means my name, image, physical likeness, voice, any and all attributes of my personality and/or performance;
- (b) **UOW** means the University of Wollongong, and any successors, assigns or licensees including the accommodation services and campuses;
- (c) **Use** means lawful use and includes the exclusive and perpetual right of UOW in any jurisdiction worldwide to:-
 - (i) use, copy, adapt and/or exploit;
 - (ii) mix, edit, duplicate, or re-use, or create derivative works;
 - (iii) assign, license or sub-license;
 - (iv) publicise and/or market; and
 - (v) exhibit and/or perform and/or distribute by any present or future media, for profit or otherwise.

EXECUTION AND ACKNOWLEDGEMENT

Name: _____

Address: _____

Signature: _____

Name of Witness: _____

Signature of Witness: _____

Date of Signature: _____

NOTE: this form can only be used for people over 18 years of age. If the subject of this form is under 18 years of age, the minor’s legal guardian must also give consent:

Name (Guardian): _____

Signature (Guardian): _____

Date of Signature: _____