

Photography/Videography Consent Form

Date: _____ Event or reference no.: ____

give my permission to the University of Pittsburgh to take and use photographs and video of me for promotional purposes, including, but not limited to, use in University publications, public relations, Web sites, advertising, fundraising, and/or other marketing communications materials. understand that I will not be paid for these photographs or videos and have no rights to them. I elease the University of Pittsburgh, its employees, and its agents from any and all claims of harm or otherwise that may occur from showing, using, or distributing these photographs or videos in print, electronically, or via any other method.		3525 Forbes Avenue Pittsburgh, PA 15260 412-624-0409 Fax: 412-624-7682 Bellefield Hall 307 Bellefield Hall 315 S. Bellefield Ave. Pittsburgh, PA 15260 412-624-4644
understand that I am required to have a parent or legal guaf I am under 18 years of age.	rdian sign this form as well	communications.pitt.edu
Sign Name	Print Name	
	-	
	-	
Parent or Guardian (if under 18):		

Craig Hall 400 Craig Hall 200 South Craig Street Pittsburgh, PA 15260 412-624-4147

Fax: 412-624-1021

200 Forbes Pavilion

Forbes Pavilion