

Media Recording Waiver and Release — Child Informed Consent

TO: THE GOVERNORS OF THE UNIVERSITY OF CALGARY RELEASE AND CONSENT AGREEMENT

	RELEASE AND CONCERN ACKEENERS			
CHIL	D'S NAME			
PAR	ENT'S/GUARDIAN'S NAME			
PAR	ENT'S/GUARDIAN'S ADDRESS			
cou	RSE CODE/ACTIVITY & TITLE			
cou	RSE/ACTIVITY DATE			
abor pare Univ	University of Calgary (the "University") has asked individ we to appear in photographs, video, audio recordings, or of ent/guardian, have agreed for my child to participate. In coversity's course, activity or publicity program, and the Unitable consideration, the receipt and sufficiency of which is the following:	other forms of digital onsideration of the va versity's promotion th	media (the "Materials" Ilue of participating in Iereof, and other good). I, as the I and
1.	I consent to the use of my child's name, image, likeness, appearance, voice and other personal characteristics in the Materials and authorize the University to use, reproduce or distribute the Materials for instructional, marketing, advertising, trade, promotional or other business or educational purposes and for use in any University publications, broadcasts, social media posts or other forms of printed or electronic media.			
2.	I irrevocably transfer and assign to the University my child's rights, title, interest and copyright, if any, in the Materials, and hereby waive all moral, personality, publicity or privacy rights therein. I acknowledge and agree that I or my child have no right to review or approve the Materials before they are used, reproduced, or distributed and acknowledge and agree that the University has no obligation to use, reproduce or distribute the Materials.			
3.	I irrevocably release the University, and its successors or assigns, from all liability in connection with the Materials and the use, reproduction or distribution thereof. This release and consent agreement is governed by the laws of the Province of Alberta. Any claim or cause of action arising under this agreement shall be brought in the provincial courts of Alberta.			
4.	I understand that having granted the consent herein, either I or my child may withdraw that consent at any time by notifying the University in writing, provided that the University shall continue to have my and my child's consent to use, reproduce or distribute any Materials which have already been produced or that the University has committed to producing prior to the withdrawal.			
5.	I certify that I have read and fully understand this releas capacity to enter into this agreement on behalf of my c		nent and that I have th	ie legal
Date	ed at the City of Calgary, in the Province of Alberta, this _	day of	, 20	
SIGNED BY PARENT/GUARDIAN		WITNESSED BY UNIVERSITY OF CALGARY		
PRINT NAME		PRINT NAME		
SIGNATURE		SIGNATURE		

The information in this release and consent agreement is collected under the authority of section 33(c) of the Freedom of Information and Protection of Privacy Act (Alberta) and is required for the operation of the University's publicity program. For related privacy questions, please contact the University FOIP Office at 403-210-8405 or at foip@ucalgary.ca.