

CLAYTON STATE UNIVERSITY

Video/Photo Release Form

I, _____, hereby grant **Clayton State University** and its representatives the right to take photographs, video recordings, and/or audio recordings of me during the CSU Marketing video production.

I authorize the University to use these materials for purposes including, but not limited to:

- Educational publications
- University websites and social media
- Promotional materials
- Press releases and academic presentations

I understand that:

- I will not receive any compensation for the use of these materials.
- The University may edit, alter, copy, exhibit, publish, or distribute the materials without my inspection or approval.
- I release and hold Clayton State University harmless from any claims related to use of my image, voice, or recordings.

I DO NOT consent to the use of my image/recordings on social media platforms.

Participant Information

- Full Name: _____
- Email Address: _____
- Phone Number: _____
- Date: _____

Signature: _____