PACE UNIVERSITY AUDIOVISUAL CONSENT AND RELEASE

I,	
I understand that this Consent and Release permanent	tly and irrevocably waives my right to any compensation and ty that I may have in connection with the University's use or
licensing to third parties of my image, my voice, and/or	·
Accordingly, I permanently and irrevocably release the University and its trustees, officers, employees, volunteers, and agents from and against any and all claims or liability alleging invasion of intellectual-property rights; the rights of privacy and publicity; and the right of compensation that may arise from the University's use of my image, my voice, and/or my name as authorized in this Consent and Release.	
By my signature, below, I hereby certify that I have rea freely and voluntarily signing the same.	nd and fully understand this Consent and Release and that I am
Signature (parent or guardian if under 18 years old)	Date
Name Printed	U ID # (if known)
Telephone	E-mail address
School/Major	Expected year of graduation
Describe what you are you wearing so we can identify	you in photographs.
Please check all that apply to you:	
Athlete Combined Degree Honors	International Transfer Veteran
Photographs will be available for download at www.p	pace.edu/photos using the password Pace1906.
NOTES (FOR OFFICE USE ONLY)	