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# Image Release Form

I grant Bentley University (a) permission to capture my image in any media, including but not limited to photography, video and/or film, in public and/or campus settings and (b) the irrevocable right to use such images in any manner or media for university purposes, including but not limited to publicity and marketing. I hereby unconditionally release Bentley University and its employees and representatives from any and all liabilities, claims, and demands whatsoever, in law or equity, whether known or unknown, which I (or my heirs, assigns and/or representatives) ever had, now have, or in the future may have relating to the uses described herein.

_____
Print Name

_____
Signature

_____
Date

_____
Phone

_____
E-mail

If the person photographed is under the age of 18, I certify that I am his or her parent or legal guardian, and I give my consent for him or her to photographed by Bentley University under the terms detailed above.

_____
Parent/Guardian Signature Date