**PERSONAL IMAGE RELEASE FORM - YOUTH**

(to be completed by parent/guardian if child is under 19 years of age)

I hereby grant to the University of Nebraska the irrevocable and unrestricted right to use, reproduce, publish and copyright photos and video recordings of my child/ward taken in the course of the 4-H activity; and to use such photos for any lawful purpose, in any manner or medium, and to alter the same without restriction.

I hereby release the University of Nebraska, its Regents, officers, employees, agents and assigns, from any and all claims, actions, and liability relating to the use of said photos and recordings.

IN WITNESS WHEREOF, the undersigned, intending to be legally bound hereby sets their hand and seal the date written below.

Parent/Guardian Printed Name

Parent/Guardian Signature

Youth Printed Name Date

CONTACT INFORMATION OF PARENT/GUARDIAN

 Street Address

 City, State, Zip

 Phone Number

 Email Address

Appendix A: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_