



Media Waiver & Release:

I consent to being photographed, interviewed and/or videotaped by representatives of Savannah State University and media outlets (newspaper, T.V. stations, etc.). Any information or images obtained from those activities may be reproduced by the university and/or the public media for use in advertising, publicity, or educational activities, including but not limited to city and university publications, videos, print, and television news. I hereby waive any claims I may have, and release the university and its employees from liability of claims arising out of such activities.

Please initial next to each applicable statement.

_____ Yes, I may be photographed, interviewed, or videotaped for media use.

_____ No, I may not be photographed, interviewed, or videotaped for media use.

SSU, SSU Fisheries, and Marine Science Program Websites:

I consent to my first name only and/or picture appearing on the SSU, SSU Fisheries, and Marine Sciences Program websites.

_____ Yes, I do

_____ No, I do not

Verification:

I verify that the information provided on this form is accurate and current.

PRINT Name

SIGNATURE

Date

WITNESS

Date