Collège communautaire du Nouveau-Brunswick

Media Release and Waiver

Date of Event: _____/_____/____ Time: _____
Year / Month / Day

Place: _____
(*campus, room, etc.*)

Subject: _____

❑ Interview ❑ Broadcast ❑ Photography ❑ Video ❑ Other: _____

Name of media/production or publishing house: _____

I, _____, the undersigned grant permission to the Collège communautaire du Nouveau-Brunswick (hereinafter called "CCNB"), the media, production or publishing house to broadcast the contents of the above-mentioned media activity on any communication medium (analog, digital or printed) for promotional, informative or educational purposes. I also give the right to use, for promotional purposes, my name, my photograph, or audio or video excerpt, for all current and future forms of media (social media, press, radio, websites, television, etc.).

I understand the terms and conditions of this release and waiver and have been informed in a satisfactory manner on the nature and motive for my participation in the activity and agree to conform to it.

My signature certifies that I consent to the above activity and release the CCNB and its representatives from liability of claims arising out of such activities.

Name *(please print)*	Signature	Date
Name of witness *(please print)*	Signature	Date

Persons under the age of 18 **must also** have a parent or guardian sign this *Release and Waiver* form as follows:

I hereby certify that I am the parent or guardian of _____

and, on his or her behalf, I agree to this release and waiver.

Name *(please print)*	Signature	Date