

APPEARANCE RELEASE**PROJECT:** _____ **PROJECT DATE** _____

I agree to **THE UNIVERSITY OF NEW SOUTH WALES ("UNSW")**, including its related entities and agents, video and audio recording, filming and/or photographing me including recording my voice, ("my Appearance") and publishing, promoting, distributing and exploiting my Appearance, for UNSW's educational, promotional and editorial purposes.

I further agree that UNSW may use and re-use and allow others to use, my name, voice and likeness in part and in composite form and in any current or future medium, including but not limited to print, electronic and broadcast media.

All rights in my Appearance and any rights in the recording throughout the universe in perpetuity in any and all formats and media now known or hereafter devised shall belong to UNSW to use as it wishes.

I warrant that any statements made by me during my Appearance are to the best of my knowledge true and that neither those statements nor my Appearance will violate or infringe upon the rights of any other person or entity.

I waive any and all rights of attribution and any and all rights to inspect or approve the finished photographs, video, audio, printed or electronic matter that may be used in conjunction with them now or in the future, whether that use is known to me or unknown, in connection with any use of the rights granted above relating to my Appearance. I waive any right to royalties or other compensation arising from my Appearance.

AGREED AND ACCEPTED**NAME** _____
(Please Print) (Signature)**ADDRESS** _____ **DATE** _____**CITY** _____ **POSTCODE** _____**PHONE** _____ **EMAIL** _____

If the person in the Appearance who has signed this release and consent is under 18 years of age, this Release must also be agreed to by the Parent or Guardian of the person appearing.

I am a parent (or guardian) of the person in the Appearance who has signed this release and consent, and I hereby agree that I and the said person appearing will be bound by all the provisions contained herein.

NAME _____
(Please Print) (Signature)**DATE** _____