



LENAWEE THERAPEUTIC RIDING

Michigan 4-H Proud Equestrians Program Parent/Guardian-Adult Volunteer Video, Film and Photography Release Form

This form is valid for a period of one year from the date signed.

No individual can be accepted as a volunteer in a Michigan 4-H Proud Equestrians Program in any capacity until this form has been completed by the rider’s parent(s)/guardian or by an adult rider who is a legally competent adult 18 years of age or over.

Note: Participation in a Michigan 4-H Proud Equestrians Program as a volunteer is **not** contingent on an affirmative (yes) response on the “Parent/Guardian-Adult Volunteer Video, Film and Photography Release Form.”

I authorize Michigan State University to record the image and voice of the subject named below and give MSU and all persons or entities acting pursuant to MSU’s permission or authority, all rights to the use of these recorded images and voice. I understand that said images and/or voice will be used for educational, advertising and promotional purposes in all conventional and electronic media, including, but not limited to, the internet, and any future media. I also authorize the use of any printed material in connection therewith. I understand and agree that these images and recordings may be duplicated, distributed with or without charge, and/or altered in any form or manner without future or further compensation or liability, in perpetuity.

Yes No

Volunteer’s Full Name _____ **Parent/guardian name (if volunteer is under 18 years old)** _____

Address: _____ City: _____ St: _____ Zip: _____

Signature: _____ **Date:** _____
Adult volunteer over the age of 18

Signature: _____ **Date:** _____
Parent/guardian

Witness: _____ **Date:** _____

MICHIGAN 4-H PROUD EQUESTRIANS PROGRAM
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