UNIVERSITY OF MAINE SYSTEM RELEASE AGREEMENT

I,, hereby grant and	authorize the University of Maine System, acting through the
University of Maine, (hereinafter UMS) its employees and	agents to make use of, license or assign the use of, my image,
appearance, likeness, voice and/or photograph, and other	r reproductions of any of these, in still photographs, videotapes,
publications, audio, sound recordings, web sites, electronic	ic and other media and/or motion pictures, (hereinafter all of
which are included in the term "Material") and to do so wit	h or without mention of my name.
I understand and agree that I am to receive no compensa	tion of any kind, monetary or otherwise, on account of or arising
from the production, publication, recording, rebroadcasting	g, or other use of such Material.
UMS shall have complete ownership of the Material produ	uced or published and shall have the exclusive right and license
to make such use of that Material as it wishes, including, b	out not limited to the right of performance, display, reproduction
and distribution in all media, and the right to create, perfor	m, display and distribute derivative works of the Material.
I agree to indemnify and hold UMS, the University, its emp	oloyees and agents, harmless from and against any and all
claims, damages, lawsuits, judgments, and expenses, inc	luding reasonable attorneys' fees, that UMS may become liable
to pay or defend arising out of or caused by any matter or	material furnished or spoken by me in connection with my
appearance.	
I hereby release UMS, its employees and agents from all	expenses, claims and liabilities incurred by me arising out of or
in connection with my appearance and/or the use of the M	flaterial, except to the extent that those expenses, claims or
liabilities are the direct result of the negligent acts or omis	sions of UMS, the University, its employees or agents.
This agreement shall be governed and construed according	ng to the laws of the State of Maine.
If under 18, must be signed by parent or guardian	
DATE SIGNATURE	PLEASE PRINT NAME
ADDRESS	PHONE NUMBER
IF APPLICABLE, SIGNATURE OF PARENT OR GUARD	DIAN OF