Photo and Video Release Form

Permission to Use Photograph and/or Video

Event: All **e**vents and **c**lasses associated with Teach Oklahoma, Lead Oklahoma, Educators Rising and **c**ollegiate **e**vents.

Location: Various

I grant to [The Oklahoma Teacher Connection], the right to take photographs of me, use photographs and videos provided, and my family in connection with the above-identified event(s). I authorize [The Oklahoma Teacher Connection], its assigns and transferees to copyright, use and publish the same in print and/or electronically. I agree that [The Oklahoma Teacher Connection] may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, competitions and Web content.

I have read and understand the above:	
Signature	
Printed Name	
Address	
Date	-
Signature, parent or guardian(if under age 18)	
Parent or guardian's telephone number:	



Please return to Melissa Brevetti mbrevetti@osrhe.edu

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