

Board Policy Reference:

Blue Mountain Community College Administrative Procedure

Procedure Title: Photo/Video Release Policy Procedure Number: 02-2016-0001

Accountable Administrator:	VP Public Relations
Position responsible for updating:	VP Public Relations
Original Date:	
Date Approved by Cabinet:	
Authorizing Signature:	
Dated:	
Date Posted on Web:	
Revised:	
Reviewed:	

IV.B.

Purpose/Principle/Definitions:

Blue Mountain Community College (BMCC) uses photographs, photographic images, names, and audio and video recordings of employees and students for general publicity in publications, on its website, on social media, in public relations, promotions, publicity, and advertising, etc.

BMCC does not collect release forms from its students, employees, or guests for the use of images or films taken in public places on campus. Any employees, students (or the parents or guardians of such persons, if under age 18), or guests who do not want to be photographed or recorded, or to have their names, voices, or biographical materials used in connection with any such recording, must notify the Public Relations Office at BMCC.

In addition, employees, students, and guests who do not want to be photographed or recorded, and who have notified the Public Relations Office in writing, are responsible for removing themselves from the area in which photographing/recording is occurring, or notifying the camera operator of their opt-out status. Failure to do so may result in the individual's inclusion in a photograph or recording;/ it will be deemed equivalent to a release, and will allow the college to use that photograph or recording as it chooses.

Special Form: Photo Opt Out Release for BMCC Students and Employees Talent Release for Guests External to the College

Photo Opt-Out Release



Complete and return this form to the BMCC Public Relations Office ONLY if you do NOT give permission for your photo, audio, or video to appear in possible university publications and/or publicity, including the campus website or social media. A new Opt-Out Release form must be submitted each year a student is in attendance.

I do not authorize Blue Mountain Community College, or its officers, employees or agents, to record my photographs or other images or likenesses in the form of audio, video, or any other medium or to use, reproduce, modify, distribute, or publicly exhibit such recordings, in whole or in part, for any purpose. Further, I do not consent the use of my name, voice, or biographical material in connection with any such recording. I hereby confirm that I am of legal age (18) and have every right to contract in my own name as stated above. I further affirm that I have read the above "Photo Opt-Out Release", and am familiar with its contents.

Date:	Student Name:			
Address:				
City:		State:	Zip:	
Phone:	Email:			
Signature:				

I hereby confirm that I am the parent or guardian of the student named above. I further affirm that I have read the above "Photo Opt-Out Release", and am familiar with its contents.

Parent/guardian name (for students under 18):

Parent/guardian signature (for students under 18):

Please return this completed form along with a current photo to the Public Relations Office (P-107A)					
For Office Use Only					
Processed by:	Date:				



Talent Release

I, _____, authorize Blue Mountain Community College to use my name, statements and images of me, without charge, for promotional purposes in college publications, advertising, video, web, new media, or other formats.

I waive any right that I may have to inspect and/or approve the finished product or products or the editorial, advertising or printed copy or soundtrack that may be used in connection with these statements and images. I understand that I will not receive financial compensation (in any form) for the use of these statements and images.

I agree to hold harmless Blue Mountain Community College from any liability by virtue of any blurring, distortion, optical illusion or use in composite form whether intentional or otherwise that may occur or be produced in the making, processing, duplication, projecting, or displaying of these pictures or images.

AGREED AND ACCEPTED

Printed Name			
Signature of Model/Talent		Date	
Address			
City			
Phone			
Witness (Printed)		Date	
Witness (Signature)			
If under age 18, the name and sign	ature of a parent is r	equired.	
Name of Parent			
Signature			

 Please return this completed form along with a current photo to the Public Relations Office (P-107A)

 For Office Use Only

 Processed by:
 Date: