

Written or Video Testimonial Consent and Release Form

College of Menominee Nation

N172 Hwy 47/55
Keshena, WI 54135
715-799-5600

Are you submitting a written or video testimonial? Written Video

Authorization and Release Information

I understand my testimonial as outlined above or in the video or written testimonial recorded of me (the "Testimonial") and made on behalf of the College of Menominee Nation, (hereinafter called "CMN") may be used in connection with publicizing and promoting CMN. I authorize CMN to use my name, brief biographical information, and the Testimonial as defined on this form or by me in this video or written testimonial.

I hereby irrevocably authorize CMN to copy, exhibit, publish, or distribute the Testimonial for purposes of publicizing CMN's programs or for any other lawful purpose. These statements may be used in printed publications, multimedia presentations, on websites, or in any other distribution media. I agree that I will make no monetary or other claim against CMN for the use of the statement.

In addition, I waive any right to inspect or approve the finished product, including written copy or edited video, wherein my likeness or my testimonial appears.

I hereby hold harmless and release CMN from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

Signature:

Signature of parent or guardian, if applicable:

I have read the authorization and release information and give my consent for the use as indicated above.

E-mail: _____

Address: _____

City, State, Zip: _____

Telephone: _____

Date: _____