INTERNSHIP Liability & Photographic Release Agreement

Student Name:	**Age:**
Mailing Address:	
Parent/Guardian Phone:	**Parent/Guardian E-mail:**

Mentor's Name:	**Business Name:**

In consideration of Dysart Unified School District agreeing to photograph or interview me and in consideration of the use of the facilities and services provided to me by the Dysart Unified School District, the undersigned, both individually and on behalf of the undersigned's children, spouses, heir and legal representatives, does hereby:

1. Consent to the use and release to Dysart Unified School District the use of my name and my likeness, (Participant) whether in still, motion pictures, or video tape, my photograph and/or other reproduction of me or my property, including my voice and features, with or without my name, for any editorial, promotion, trade business or other purpose whatsoever. Dysart Unified School District may exercise its rights in any way it sees fit for its productions, for advertising and for other purposes. I intend for Dysart Unified School District to rely upon this release and understand that it is irrevocable; and
2. Agrees to release, not to sue, and to indemnify and hold harmless Dysart Unified School District for, from and against any and all injuries, claims, demands, damages, actions, causes of action, suits or judgments of any kind or nature whatsoever (including attorneys' fees and other costs in the defense of any such claim or suit) brought by myself or on behalf of myself as a result of any loss, damage or injury to any persons or property arising out of or in any way relating to any action, inaction or participation in any video or photographic productions of the Dysart Unified School District.

The undersigned further agrees that Dysart Unified School District may use or cause to be used, these items for any and all broadcasts, publications or reproductions, without limitation or reservation or any fee.

Student Signature Date

Parent/Guardian Signature Date

Parent/Guardian Name (Please Print)