**Minor Model Release**

***University of Delaware*** - ***Photo Services, Digital Content and Social Media***

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I understand that the images of me, the minor and / or the copyrightable works may be incorporated into other works and may be protectable by copyright , and I agree that any copyright in same shall be the sole property of the Univer sit y.

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I hereby warrant that I am of full age and have every right to contract for the minor in the above regard. I state further that

I have read the above aut horization, release and agreement prior to its execution and that I am fully familiar with the contents

hereof.

PLEASE PRINT

**Name of Minor: \_ Address of Minor:.**

**City, State, ZIP**

**Phone Number:**

**Name of Parent/Guardian:** \_ **Signature of Parent/Guardian:** \_ **Date: \_ Event/Timeframe (i.e . academic year, camp): \_**