

Media Consent Form

I hereby authorize the use and/or disclosure of my photo or video image as described below in this Photo/Media Consent Form. I understand that this authorization is voluntary, that I am not required to sign this authorization. No individual has coerced me into signing this authorization, and I am providing this authorization under my own free will.

I hereby authorize MoDOT Southeast District to:

Yes No

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Take video or still photos of me (or my child if he or she is a minor) |
| <input type="checkbox"/> | <input type="checkbox"/> | Interview me (including the use of an audio or video recording device) |
| <input type="checkbox"/> | <input type="checkbox"/> | Release photos or images to requesting media outlets |

Purpose of Request:

- | | | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | For print or electronic (television, radio or Internet) news or feature story |
| <input type="checkbox"/> | <input type="checkbox"/> | For inclusion on the MoDOT entity website |
| <input type="checkbox"/> | <input type="checkbox"/> | For a MoDOT print, television, outdoor or radio campaign |

I understand that images may be edited or modified or retouched for artistic or graphic design purposes.

I hereby waive all right I may have to any claims for payment or royalties of any kind in connection with the use of image by MoDOT for marketing purposes.

I hereby release MoDOT from any and all claims and demands arising out of our in connection with the creation and use of my image by MoDOT. I understand I have the right to revoke this authorization by contacting MoDOT's Community Relations Department at 573.472.5334.

By signing below I acknowledge and affirm the statements in this Photo/Media Consent Form.

Signature of individual or individual's representative

Date

