

Scalable Game Design Teacher Media Release Form

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If you agree, please **check** the paragraph below and **choose** what information release you grant, **fill out** the information, and sign.

I have read this release before signing below, and I fully understand the contents, meaning and impact of this release. I understand that I am free to address any specific questions regarding this release by submitting those questions in writing prior to signing (SGDhelp@colorado.edu), and I agree that my failure to do so will be interpreted as a free and knowledgeable acceptance of the terms of this release.

I agree to release both my name and images (Photographs and video).

I agree to release images (Photographs and video) but not my name.

Name: _____ Date: _____

School/Organization Name: _____

Email Address: _____ Phone Number: _____

Signature: _____