

FOR FILING in LAND OFFICE:	
Topic:	
Description:	
Use:	
LAND Staff:	
Photog/Reporter:	

AUTHORIZATION FOR USE OF PARTICIPANT CONTENT FOR PUBLICATION

Name of former student-athlete/st	udent-manager:
Address (street/city/state/zip):	
Telephone:	Email:
("LAND") and any of its affiliated pa limited to, my name, voice, signature, interviews, Sensitive Content (as that used in, but not limited to, newslet	ars of age and legally authorized to execute this Authorization. I authorize Life After Notre Dame artner entities to use and/or disclose any and all personal information about me, including, but not image, likeness, distinctive appearance, gestures, mannerisms, photos, videos, audio-recordings, term is defined herein), and all other personal information (the "Content") to be disclosed or otherwise ters, flyers, posters, brochures, ads, annual reports, press kits, submissions to journalists, websites, orint and digital communications for the advancement of LAND, its services and initiatives, public r any other lawful purpose.
my physical or mental health, substa	in certain sensitive information I have voluntarily provided to LAND, including information regarding nce use, communicable diseases, or other sensitive personal information ("Sensitive Content"). I all Content, including Sensitive Content, except as follows:
 remain effective for one year unit Any disclosure carries the potent covered by the same laws that a I release LAND, its officers, direct partner entities (the "Released P disclosure of the Content in continuegligence on the part of any Rel The Content will be handled in ac This Authorization shall be govern acknowledge and agree that LAN 	languages, media, formats and markets, including social media and other electronic forums, and shall ess I otherwise revoke it in writing as explained below. tial for re- disclosure by the recipients of the Content and the recipients of the Content may not be pply to LAND. tors, employees, agents, representatives, predecessors and successors in interest, and its affiliated arties") from any action, claim or liability whatsoever that may arise from the disclosure or renection with the purposes described above in bold, including with respect to negligence or gross
Check as appropriate:	
☐ I authorize LAND to disclose the	student-manager with the University of Notre Dame. • Content, except as limited above, in support of the efforts listed above in bold. I understand that method that method is affiliated partner this Authorization will not affect my ability to receive services from LAND or its affiliated partner
I have read and understand the stat above.	ements, and, without coercion, I willingly authorize the use and disclosure as specified
X	Date:
Signature of Former Student-Ath	ılete/Student-Manager

To revoke Authorization, write to: Life After Notre Dame (LAND), 1400E Angela Blvd., Suite 134, South Bend, IN 46617, (703) 431-1801. Revoking this Authorization will not apply to Content that has already been released in accordance with this Authorization.

01 Consent Form

Name:	Date:	01 Consent Form Pg 2 of 2
CONSENT	FOR PARTICIPATION AND USE	OF
PHOTOGRAPH	AND/OR INTERVIEW FOR PUBI	LICATION
I hereby confirm that I am over 18 years of age a authorization, in a manner consistent with Ind and its affiliated partner entities to take, edit, image, likeness, distinctive appearance, gestures information (the "Content") obtained during th athlete/student manager or an employee, vo the property of LAND and, in some cases, a sp become the property of LAND under applicab Content for any lawful purpose in accordance	and legally authorized to execute this Consent. d. Code § 32-36-1 and other applicable law, a disclose, exhibit, publish or otherwise makes, mannerisms, photos, videos, audio-recording e course of my participation in LAND service lunteer, vendor, contractor, or other individual pecified media outlet or other third party. In ole law, I hereby grant a revocable, unlimited	I hereby provide my consent and for Life After Notre Dame ("LAND") a use of my name, voice, signature, ngs, interviews, and all other personal es, whether as a former studential with LAND. All Content becomes the event any Content does not
 professional athletic endeavor. My participation in interviews or other acrisk which may arise, for example, during to the greatest extent possible, release ar connection with my participation. I hereby release LAND, its officers, director interest, and its affiliated partner entities including, but not limited to, any claim of this Consent, or as may arise in connection. I may revoke this Consent at any time by control of the consent. 46617, (703) 431-1801. Revocation will not have been taken based on this Consent. 		personal risk, including physical cand and accept these risks and, arties that may arise in decessors and successors in him, or liability whatsoever, ept as expressly provided for in Released Party. Blvd, Suite 134, South Bend, IN on released or other actions that
☐ I authorize LAND to disclose the Content	ent-manager of the University of Notre D t, except as otherwise exempted on Page 1, s decision to sign, or not to sign, this Authoriza ted partner entities.	solely in support of the efforts listed
I am a/an □ employee □ voluntee I understand that my decision to sign or n LAND. Content of employees of LAND or its	er is visitor vendor contractor and to sign this Consent will not affect my em affiliated entities will be handled in accordance interviews, photographs, videos, or other elements.	nployment or relationship with with applicable law and personnel

I have read and understand the statements above and, without coercion, I willingly consent to participation and the use and

Signature of (select one) □ Former Student-Athlete/Student-Manager □ Other as listed above

of any employment record.

disclosure as specified above.