

Recording Location: _____

Recording Dates: _____

**UNIVERSITY OF NORTH TEXAS
Denton, Texas**

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I am of full legal age and competent to contract in my own name. I have read this Multimedia Waiver and Release and am fully familiar with its contents and the meaning and impact thereof and agree to be bound by its terms.

(Participant Signature)

(Printed Name)

(Date)

**Consent of Parent or Guardian
(Applicable if Participant is under 18 years of age or requires a guardian)**

I am the parent of the minor individual named above, or the legal guardian of the individual named above. I am at least 18 years of age, and I have the legal authority to execute this Multimedia Waiver and Release on the Participant’s behalf. I approve and agree to the terms and conditions as set forth above.

Parent/Guardian Signature: _____

Printed Name: _____

Date: _____