

NTID Revised Photo/Video Release Agreement

Name:

Date:

I agree to allow RIT/NTID to use and post my name, photo and video recordings in the following situations: (please check all that apply)

- Zoom recordings for classes
- Class presentations
- RIT/NTID social media channels
- RIT/NTID websites
- RIT/NTID course materials

I understand that I will not be paid for the use of my name, photo or video recordings.

I understand I can ask RIT/NTID to remove images that include my name, photo or video recordings at any time.

