



Westside UU Church Recording Release Form

I, _____, consent to have my speech recorded and/or videotaped for broadcast on Westside Unitarian Universalist Church's (WUUC) website. I understand that this may be available on the church's web site in archived formats, and may, at the discretion of WUUC, be included in pod-casting and /or posted for playing on our site. Any video recordings may also be placed on Westside's YouTube channel.

I consent to publication of the recording, in whole or in part, without restriction or limitation after presentation. I consent to the use of my name, likeness, voice, and biographical material about me in connection with the program publicity and for institutional purposes. I waive the right to inspect or approve any such use of my name, likeness, voice, or biographical material. I expressly release WUUC, it's directors, officers, agents, employees, and members, from any and all possible claims. My signature in no way authorizes the church, it's directors, officers, agents, employees, or members further copyright permission.

Event Title _____

Event Date _____

Location: Westside UU Church, 901 Page Ave, Fort Worth ,TX 76110

Contact: worship@westsideuu.org

Phone (_____) _____ - _____ hm / wk / cell (circle 1)

e-mail: _____

Name (print full name) _____

Signature: _____ Date: _____