

QUITCLAIM FOR THE USE OF VIDEOGRAPHY

PERSONAL DETAILS

NAME:

DATE OF BIRTH:

(DD-MM-YYYY)

TELEPHONE NUMBER:

EMAIL ADDRESS:

DECLARES THAT HE/SHE COOPERATES IN THE PRODUCTION:

PRODUCED BY *(Name videographer/production company)**:

COMMISSIONED BY *(Department/contact person)*:

MY CONTRIBUTION CONSISTS OF

Cooperation in a video production on behalf of this assignment.

Use of the material by the University of Twente for all forms of promotion and online marketing.

Use of the material offered to external parties for journalistic and/or commercial purposes.

This material may only be used for this assignment.

CONDITIONS

By signing this 'quitclaim' form, the undersigned declares that he/she grants permission for the use of the footage and accepts that he/she waives all further rights regarding the use of the footage by the commissioning party (University of Twente).

The footage taken is the property of the University of Twente and may freely be used and archived as video for all forms of promotion and marketing at all times, unless it was indicated above that the footage may only be used for the above-mentioned production.

Furthermore, the undersigned declares that he/she will not receive any fee for the aforementioned cooperation.

By signing this document, the undersigned also declares that he/she will perform the agreed duties to the best of his/her abilities.

I confirm that I am 18 years of age or older.

The person being portrayed is under 18. I am the legal representative and will undersign this declaration.

CITY AND DATE OF SIGNATURE:

CITY

DATE (DD-MM-YYYY)

SIGNATURE OF CONTRIBUTOR

SIGNATURE OF COMMISSIONING PARTY