

AUDIO/ VIDEO RELEASE FORM

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Thank you for allowing Meredith College to preserve the program title listed. This will enhance the learning environment for the entire Meredith College Community.

I hereby grant permission to Meredith College to make a video and/or audio recording of my presentation to be kept in the college's archive, for educational use. Meredith College also has permission for the recording to be:

Copied for individual use, at the discretion of the library yes_____ no_____

Distributed over the campus video delivery system yes_____ no_____
for a limited period of time

Shown in public performance on campus with no charge yes_____ no_____

Cablecast over the local educational cable TV system yes_____ no_____

Signed _____

Date _____

Program title:

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