



Tom Hope Memorial Media Scholar Program

Media Product Release Form

As a college student who is a RAFAS Tom Hope Memorial Media Scholar Nominee, I hereby grant permission to RAFAS and the Tom Hope Memorial Media Scholar Program to use the media products that I submit in any or all of the following ways:

To be viewed by the Tom Hope Memorial Media Scholar Committee, judges, and my fellow Hope Scholar nominees.

To show to the public, face-to-face and/or via any electronic delivery system.

To use in any medium in connection with news reports, publicity or promotion.

To convert to another medium or format in order to facilitate the above uses.

To add captions or subtitles as needed for accessibility to a broader audience.

I certify that the work I have submitted complies with all copyright and other applicable legal requirements. My signature (and the signature of my parent or guardian if I am under the age of 18) below indicates my agreement with, and approval of, the above terms of use.

Student's Name Printed: _____

Student's Signature: _____ Date: _____

Mailing Address: _____

College Email: _____ Permanent Email: _____

Phone Number: _____

_____ I am 18 years of age or older

_____ I am under the age of 18.

My parent's name/signature below indicate their approval:

Print Parent's Name: _____

Parent's Signature: _____ Date: _____

Please return this completed form:

Attach to an e-mail to Chris Pruszyński at: pruszynski@aol.com

Or send via U.S. Mail to:

Tom Hope Memorial Media Scholar Program

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Fairport, NY 14450