



## Media Release Form

I understand that Boston University is interested in recording [my lecture/speech/poetry reading/performance/symposium, etc.] and presenting it on **BU Universe** ([www.bu.edu/today/buniverse](http://www.bu.edu/today/buniverse)). In connection with my participation in the event named below I grant to Boston University the following rights and permissions:

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I certify that I am age 18 or older and have read the foregoing, fully understand the contents thereof, and agree to these terms.

Name of Event: \_\_\_\_\_ Date of Event: \_\_\_\_\_

Name (Printed): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Please return to BU Universe by:

- Fax to BU Universe (attn: Nelia Ponte) at 617-353-6488 or
- E-mail as an attachment to [nponte@bu.edu](mailto:nponte@bu.edu) or
- Mail hard copy of form to: Nelia Ponte, BU Universe  
10 Lenox Street, Brookline MA 02446