

<b>Speaker:</b>	<b>Date:</b>
<b>Department:</b>	
<b>Title/Description of Recording</b>	

## SPEAKER'S PERMISSIONS FORM

### Grant

I consent to the recording of my statements, image, likeness, actions, voice, conversations and material spoken or otherwise provided by me to Yale in connection with the [presentation/lecture/speech/performance] delivered by me on \_\_\_\_\_, 201\_ (collectively, the "Performance").

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This Agreement shall be governed by the laws of the State of Connecticut without regard to its principles of conflicts of laws, and shall be binding on me, my heirs, assigns, licensees, and legal representatives.

I have read and understood this agreement and I am over the age of 18. This Agreement expresses the complete understanding of the parties.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature:

Address: