

### Media Opt-Out Form

I do not authorize ~~UDM/K~~ to use personally identifiable recordings or photographs of myself made by ~~UDM/K~~ and its agents during or in connection with my attendance at ~~KEDM~~. I have provided a picture of myself to be used as reference to assure my dis-inclusion in any images used by ~~UDM/K~~ will notify photographers in my vicinity that I do not wish to be photographed. In signing this Form, I understand that ~~UDM/K~~ will make reasonable efforts to avoid access to, or remove, my image or voice for all purposes identified herein.

Date: \_\_\_\_\_ Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

I confirm that I have read and agree to the terms of the above "Media Opt-Out Form."  
Signature: \_\_\_\_\_

**Return this form including a reference photo to the ~~KEDM~~ Registration Desk. Form must be countersigned at desk to be effective.**

*Form and Photo Received by:* \_\_\_\_\_

*Date:* \_\_\_\_\_