

**Maverick Family Nursing Simulation Center
Minnesota State University, Mankato
School of Nursing**

Photo, Video, Audio, and SAFE-HR Release Form

- A. Pursuant to the consent provisions of the Family Educational Rights and Privacy Act, 20 U.S.C. Section 1232g, I hereby authorize the State of Minnesota, through its Board of Trustees of the Minnesota State Colleges and Universities on behalf of Minnesota State University - Mankato and those acting pursuant to its authority to:
1. Use my image, likeness, name, voice, and/or comments for educational and/or promotional purposes, worldwide, in perpetuity, and in any and all media now or hereafter known, without compensation; and,
 2. Use my Educational Data (as defined by Minnesota Statutes Section 13.32 Subd. 1(a)) stored within the Simulation, Analytics, Family-focused Electronic Health Record (SAFE-HR) software system for any educational purpose or purposes which the Minnesota State University – Mankato School of Nursing deems appropriate.
- B. I hereby release, forever discharge, and covenant not to sue the State of Minnesota, the Board of Trustees of the Minnesota State Colleges and Universities, Minnesota State University - Mankato, or any officers, employees, and/or agents of the aforementioned entities, from and against any and all claims and/or demands arising out of or in connection with the authorizations that I have granted above, including but not limited to any claims for defamation or invasion of privacy.

Name _____

Address _____

Phone (_____) _____

Signature _____

Witness _____ Date _____