

Pellegrinaggio Agostiniano in Italia

VILLANOVA UNIVERSITY

Photo Conveyance and Release Form

Date of Photographs

Event

Location

Subject / Photographer

Intending to be legally bound hereby, I agree as follows:

I hereby grant permission to Villanova University to use any photograph of me taken in conjunction with the event described above. Further, I hereby fully convey my photograph(s) described above (the "Photographs") and all copyrights and other intellectual property in connection with the Photographs to Villanova University.

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I affirm that I am more than 18 years of age.

Printed Name

_____ Date _____

Signature