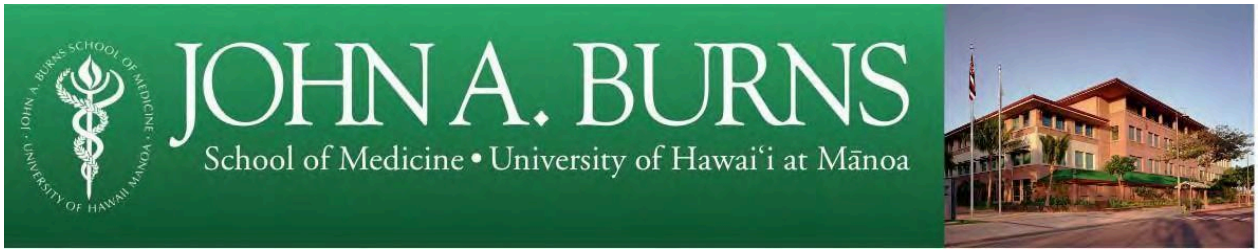

Model Authorization, Consent and Release Form for Photo, Video, and Sound Recordings

For my: (1) period of employment with JABSOM, (2) period of enrollment as a student in a JABSOM educational program, or (3) period as a resident or fellow in a JABSOM educational program, as applicable, I authorize the University of Hawai'i and its officers, agents, employees, successors, licensees, and assigns to take and use photographs, video, and sound recordings of and/or live stream my image, likeness, appearance, voice, and name (collectively, the "Recordings"): (a) for any legitimate purpose, including any educational, institutional, scientific, fundraising, or informational purposes whatsoever, (b) in perpetuity, (c) on a worldwide basis, (d) without compensation to me, (e) in any manner or media, including use on social media sites and web pages accessible to the general public, and (f) alone or in combination with other Recordings. I waive any right to inspect or approve the finished product or material in which the University of Hawai'i may eventually use the Recordings. This authorization shall be binding upon my heirs, successors, assigns, and legal representatives.

I understand that Recordings may be taken or obtained in a variety of situations in which I am involved or participating, including but not limited to JABSOM classes, University of Hawai'i and/or JABSOM events (including those open to the public), instances of clinical training on or off campus, and working, studying, walking or other activities in common areas of the campus.

All right, title, and interest in the Recordings belong solely to the University of Hawai'i. I understand that the University of Hawai'i may attract media coverage or be recorded, in whole or in part, for rebroadcast or retransmission, and consent to my inclusion in such media coverage, which may appear in print media, live or replay telecast or broadcast, podcast, and/or through social media and internet postings.

I hereby hold harmless and release the University of Hawai'i from all claims, demands, and causes of action that I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

FERPA Consent: If I am a student, I acknowledge and understand that the Recordings in some circumstances may be confidential under the Family Educational Rights and Privacy Act ("FERPA") (20 U.S.C. § 1232g; 34 C.F.R. part 99). I hereby agree to allow the University of Hawai'i to use, publicize, or disclose the Recordings for the purposes described above. Also, as described above, I understand that the Recordings may be released and viewed by students, faculty or the public, including but not limited to for promotional purposes. I understand that my authorization and/or consent is voluntary and is not a condition or requirement of my participation in class or my attendance at the University of Hawai'i. I understand that my consent may be withdrawn at any time by delivering a written, signed and dated withdrawal of consent to the JABSOM Office of the Dean.

Model/Talent Signature	Print Model/Talent Name	Date

If model/talent is under eighteen (18) years of age, the parent or legal guardian of the model/talent must sign below.

I am the parent or legal guardian of and do hereby consent and grant my permission to all of the foregoing with respect to my child.

Parent/Legal Guardian Signature	Print Parent/Legal Guardian Name	Date