



National Council of Acoustical Consultants  
317-328-0642 fax 317-328-4629  
[www.ncac.com](http://www.ncac.com)

**The NCAC Student Travel Award**  
**Student Publicity Form**  
Email completed form to [ncac-sta@ncac.com](mailto:ncac-sta@ncac.com).

Student Name  Age/Year in School   
School Name   
Permanent Address   
City  State  Zip Code   
Student Phone  Student email address   
Parents' Names  Local Newspaper   
Other media /organizations to be notified of award   
ASA or INCE Event, Date and Session/Abstract of Paper to be Presented

### Photography Release:

I the undersigned student ("Student"), hereby grant the National Council of Acoustical Consultants ("NCAC") and any photographer acting with NCAC's permission, the irrevocable right and permission, in connection with the photographs he/she has taken of me, or in which I may be included with others, the following: (a) the right to use and reuse and publish said photographs, in whole or in part, modified or altered, either by themselves or in conjunction with other photographs, in any medium or form of distribution, and for the purpose of promotional, advertising and other trade uses, as well as using my name in connection therewith, if NCAC so desires; and (b) the right to copyright said photographs in NCAC's name or in any other name that NCAC may select. I waive the right to inspect or approve the finished copy and any use thereof.

I agree that the photographs and reproductions thereof shall be the property of NCAC, and that NCAC has the full right to dispose of any or all of them in any manner whatsoever. I hereby forever release and discharge NCAC, and any photographer acting with NCAC's permission, from any and all claims, actions and demands arising out of or in connection with the use of said photographs, including, without limitation, any and all claims for invasion of privacy and libel.

I acknowledge that this release document was signed by me willingly and I certify that I am not a minor, and I am free and able of giving such consent.

Student's name (please print): \_\_\_\_\_

Student's signature: \_\_\_\_\_ Date: \_\_\_\_\_

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