



Texas A&M University

College of Veterinary Medicine & Biomedical Sciences

Interview/Photography/Videotape Consent

To Whom It May Concern:

I, _____, hereby authorize the Texas A&M University College of
(print name)

Veterinary Medicine & Biomedical Sciences to

- conduct an interview
- take photographs/video footage

of _____
(“myself” or name of person/animal for whom you are granting permission)

I understand that pursuant to this authorization, the aforementioned information can:

- be disseminated through the media
- be used for educational purposes
- be used for personal sentiment only
- be used in college publications
- other _____

Signature: _____

Relationship to Patient/Subject: _____

Witness: _____

Date: _____