RECORDING NOTICE

We wish to inform you that we are recording at the Location identified below. We will do our best to minimize the impact of our recording on your tasks. **IF YOU DO NOT WISH TO BE RECORDED, PLEASE DO NOT ENTER THIS AREA.** If you choose to enter the Location, you are deemed to consent to the University collecting, recording, using, disclosing, distributing, broadcasting, and publishing and republishing your name, physical image and voice (via print, video, photography, digital (including audio) files, the Internet, or in any other media for the purposes of communicating to the public about the University of Guelph.

Thank you in advance for your understanding and cooperation. Should you have any inquiries, please contact us.

-------------------------------------PRODUCTION DETAILS -------------------------------------

LOCATION

____________________________________________________________

Recording dates/times__________________________________________________________

University of Guelph Contact ___________________________________________________

Phone number ________________________________________________________________

Email __________________________________________________________________________