Webcasting Agreement Form

Title of Presentation: ____________________________
Presentation Date & Time: ____________________________
Name of Presenter: ____________________________

I, ____________________________ (name of Presenter) acknowledge that I have read, understand and agree to the following statements.

1. That the presentation is being provided as part of the State University of New York at Cortland educational materials. To extend the availability of such educational sessions, they may also be webcast and viewed live via SUNY Cortland’s Webcasting Services and/or web archived for on-demand viewing.

2. That I agree to one or more of the following (please check all that apply):
   - □ Live Webcasting
   - □ Archived Webcasting
   - □ Campus Cable Television Viewing
   - □ Cortland Community Cable Television Viewing

3. That I agree to the use of my name and any materials that accompany my presentation for any of the above indicated uses.

Signature of Presenter ____________________________  Date ____________________________