

MODEL RELEASE

Photo Tracking Number (M&C use only)

PRINTED NAME
(please write legibly)

SIGNATURE*

DATE

EMAIL (optional)



* By signing this form, you agree to the terms on the back (see reverse side for details). Please use ink.

08/2013

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DETAILS

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ADDITIONAL INFORMATION

ADDRESS	PHONE
CITY	STATE ZIP
CLASS FR SO JR SR GRAD FAC STAFF	MAJOR

IF MINOR*

PRINTED NAME OF PARENT OR GUARDIAN
SIGNATURE OF PARENT OR GUARDIAN

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