AUTHORIZATION FOR USE OF PHOTO/VIDEO

I hereby authorize the Glendale Community College District to publish or air any photograph or electronic likeness taken of me on campus or at college events, with or without my name, for the purpose of publicizing the college. I also hold the District harmless for any unintentional misuse of my photograph or electronic likeness as a part of the above mentioned activity.

NAME: (print)		DATE:		
ADDRESS:				
Number/Street	City	State	Zip	
SIGNATURE:	Pl	PHONE:		
I am/am not (please circle one) of legal age				
		(Parent/Guardian Signature if subject not of legal age)		
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