



MODEL RELEASE FORM

Job # _____ Location _____ Date _____

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I hereby waive any right I may have to inspect or approve the finished product or products and the advertising copy or other matter that may be used in connection therewith or the use of which it may be applied.

I hereby release Community Colleges of Spokane from any liability that may occur as a result of the use or publication of the photographs or video, use of my name, verbal or written comments in any or all media for illustrations, promotion, art, editorial, advertising or trade. I understand the opportunity to participate is given by Community Colleges of Spokane and I have full legal capacity to sign this Consent and Release for myself and/or child, and I freely give this authorization without expectation of compensation. I have read the above authorization, release and agreement prior to its execution, and am fully familiar with the contents thereof.

Print Name

Signature

Street Address

City State/Zip

Phone Number

Email

Parent or Guardian Signature – if under 18 years of age