



GROSSMONT-CUYAMACA
COMMUNITY COLLEGE DISTRICT

Model Release

I, _____, hereby consent and authorize Grossmont-Cuyamaca Community College District to use and reproduce my name, biographical information, photograph, and video image in all forms of media including publications, advertising materials, videos, and the Internet. I will make no claim of any kind. I understand I will not receive any compensation as a result of the use of my name, biographical information, photograph, and video image.

This consent and release may be revoked only in writing delivered to the Advancement and Communications Office of the Grossmont-Cuyamaca Community College District. Any such revocation will apply only to materials to be distributed in the future and not to any materials already printed or otherwise created at the time of revocation.

- I hereby warrant that I am of legal age and have the right to contract in my own name.
- I am the parent/guardian of _____, a minor.

Date _____

Signature _____

Parent/guardian
Signature
(if under 18) _____

Print name _____

Phone _____

Email _____

Event name _____

If mailing this form return to:

Advancement & Communications Office
Grossmont-Cuyamaca Community College District
8800 Grossmont College Dr.
El Cajon, CA 92020
(619) 644-7842