



## Photo Release Form

For Publicity Purposes:

I hereby authorize my name, photograph, and statement be released by Midlands Technical College for publicity purposes. I will not hold the college responsible for any unauthorized use of my name, photo, or statements.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

Signature: \_\_\_\_\_

Witnessed by: \_\_\_\_\_

Date: \_\_\_\_\_