Model/Media Release Form

Casper College periodically uses electronic and traditional media, e.g., photographs, video, audio recordings, testimonials, etc., for publicity and educational purposes. By signing this form, I acknowledge I have read and understand this document and give permission to Casper College and its designees to use such reproductions for educational and publicity purposes in perpetuity without further consideration from me.

I understand that I will need to notify the office of Public Relations and Casper College if any changes to my situation occur that will impact this media release.

Please be as complete as possible when filling this form out. Please print or write legibly. Thanks for your help!

I have read the above release and am aware of its contents.

Signature: _____ Date: _____

Printed name: _____

Current physical address: _____

Email: _____ Phone: _____

Parent or guardian signature, if under 18 (parent/guardian signature): _____

I am the guardian of the minor named above and hereby agree that we will be bound by this release.

Student Information Release

Hometown: _____

High school: _____ Year graduated: _____

College major: _____

Class standing: ☐Fr. ☐Soph. Transfer from: _____

Parent(s) names: _____

Hometown newspaper(s): _____

Hometown radio station(s): _____

Hometown TV

station(s) (if applicable): _____

Please return to Public Relations, Walter H. Nolte Gateway Center, Rm. 403 when completed.

Casper College