

**PUBLICITY RELEASE**

I, \_\_\_\_\_, hereby grant Monroe Community College the right to use my name/ home address/ image/ voice recording/ testimonial in college news releases, feature articles, advertisements and promotional efforts.

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Parent or Guardian Signature Date  
*(If under age 18)*

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

Phone: \_\_\_\_\_

Local newspapers in my hometown: \_\_\_\_\_

\_\_\_\_\_

Please return to: Monroe Community College, Public Affairs Department, 1000 East Henrietta Road, Rochester, NY 14623, or the photographer.

\*\*\*\*\*

**FOR OFFICE USE ONLY**

**Description of photo/individuals within photo:**  
*(for purpose of identifying individuals in photo and correlating this release with the photo)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Date sent for processing:** \_\_\_\_\_

**Date received from processor:** \_\_\_\_\_

**Purpose of photo:**  
\_\_\_\_\_  
\_\_\_\_\_