

## AUTHORIZATION FOR USE OF IMAGE, VOICE, PERFORMANCE, ARTWORK OR LIKENESS

Printed or Typed Name Address	Phone City/State/Zip	Age (II IIIII01)
<del>-</del>	Phone	Age (II IIIIII01)
Signature		Age (ii iiiiiioi )
	Date	/ Age (if minor)
I have read and understand the terms and conditions of this Autho	rization and agree to such te	rms and conditions.
I understand that, although the College will endeavor to use My Lik cannot warrant or guarantee that any further dissemination of Accordingly, I release the College from any and all liability related My Likeness in print or any and all other media, and any alteration, or otherwise, in connection with said use. I also understand that I regranted in this Authorization.	My Likeness will be subject to the dissemination, reprod distortion or illusionary effec	ct to College supervision or control. Juction, distribution, and/or display of ct of My Likeness, whether intentional
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use my photograph, my voice or quotes/excerpts of my written artwork, my musical performance, my name, alias, or biological info (hereinafter collectively referred to as "My Likeness") for purpoinstructional and/or educational purposes, publicity, marketing apayment, royalties or other compensation to me.	or verbally expressed words ormation, a video and/or audi oses related to the educatio	o recording or other likeness of myself anal mission of the College, including