

PHI THETA KAPPA | ALPHA THETA GAMMA
MERCER COUNTY COMMUNITY COLLEGE

MODEL RELEASE FORM

I hereby authorize Mercer County Community College and the Alpha Theta Gamma chapter of Phi Theta Kappa and/or assignees or licensees to use photographs of me or which include me and reproductions of such photos for illustrative purposes in editorial or commercially prepared materials for publicity and the advertising of those materials. The aforementioned photos and materials may appear in any current or future forms of print or electronic media. Permission is granted to make changes or alterations and to use my name in the aforementioned materials.

DATE:

MODEL:

ADDRESS:

PHONE/EMAIL:

I am over under 18 years of age. (Circle the one that applies.)

SIGNED: (Model)

PARENT/GUARDIAN:

(If model is under 18
years of age)

SIGNED:

(Parent/Guardian)
