



MODEL RELEASE

I grant Mt. San Antonio College permission to use my photograph in conjunction with publicity, publications, marketing, and advertising on behalf of the College. By signing below, I acknowledge that I am giving Mt. San Antonio College permission to use my photograph.

Signature: _____

Date: ___ / ___ / _____

Name (print): _____

Notes : _____

Staff signature: _____

Date: ___ / ___ / _____

Photographer: _____

**Mt. San Antonio College
1100 North Grand Avenue
Walnut, CA 91789**