UC Santa Cruz Photo Release – Group Release

Project _________________________________________________________

Course Title, Number, Year _________________________________________________________

Instructor’s Name _________________________________________________________

Instructor’s Signature _________________________________________________________

I give the University of California, Santa Cruz, the absolute right and permission to use my photograph in its promotional materials and publicity efforts. I understand that the photographs may be used in a website, print or online publication, print ad, direct-mail piece, social media, or other form of promotion. I release the university, the photographer, their offices, employees, agents, and designees from liability for any violation of any personal or proprietary right I may have in connection with such use. I am 18 years of age or older. (Minors must have written permission from parent/guardian.)

Students:

Print Your Name          Signature          Date

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Your sponsoring Department (within UCSC Arts Division)

cc: Arts Events Office (mail stop: Porter Fac Services)