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Photo Release Form

I grant River Valley Community College, its representatives and employees the right to take photographs of me in connection with the college. I also agree that the college has permission to use any college sponsored pictures in which any likeness appears. I authorize River Valley Community College to copyright, use and publish these photo images in print or electronically.

I agree that River Valley Community College may use such images with or without my name and for any lawful purpose, including for example such purposes as publicity, marketing collateral, presentations, print advertising and web content.

I have read and understand the above:

Signature_____

Printed name_____

Organization name (if applicable)_____

Address_____

Date_____

Parent/Guardian Signature (if under 18)_____ Date_____