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I understand that these materials, if used, will be for the promotional purposes of assisting Woody Anderson Ford and/or Calhoun Community College. I waive any claim to receive financial renumeration for the use of		
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these materials and waive any right to inspect or approve fini	sned materials and/or	advertising copy.
I hereby release Woody Anderson Ford and/or Calhoun Comr	nunity College, their le	egal representatives and
all persons acting under their permission or authority, from a	-	
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produced in taking of said photo(s) or in any subsequent prod	essing thereof, as wel	l as any publication
thereof in any media. I declare that I am of legal age and have	e every right to contra	ct in my own name in the
above regard.		
PARENT/GUARDIAN NAME (printed)		
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Street Address		
City	State	Zip
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Email Address	Phone Number	
Signature	Date	