



Institutional Marketing

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MODEL RELEASE

I, _____ (_____), or
Print full name *Age **

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Parent or Guardian

Street or box number

* If under the age of 18, signature of a parent or legal guardian is required to participate.

City, state, zip code

Phone

Date

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Status: freshman ____; sophomore ____; junior ____; senior ____; graduate ____; law ____;
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Area(s) of Study: _____.

Home Town: _____.

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