



GRAND VALLEY
STATE UNIVERSITY
COLLEGE OF EDUCATION

PHOTOGRAPHY RELEASE FORM

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I, _____, give permission to Grand Valley State University (GVSU) to use, without charge and without reservation, my likeness in any medium and for any lawful purpose, including promoting the institution, its programs and services. I waive any rights of action I may have and release GVSU and its licensees from any and all claims I may have arising from use of my likeness.

Signature

Date

Signature of parent/guardian if subject is under the age of 18.

Name of Student

Teacher

School

Signature

Relationship

Date