

## CONSENT TO PHOTOGRAPH, FILM, OR VIDEOTAPE A STUDENT FOR NON-PROFIT USE

Student Name:	School/College/University:
(As a parent/guardian of this st	udent), I hereby consent to the participation in interviews, the use o
quotes, and the use of photograp	phs/videotape taken during the course of the school year for
publicity, promotional and/or e	ducation purposes (including publications, presentations, or
broadcasts via newspaper, inter	net or other media sources).
I also grant to AMERICAN BAPT	FIST COLLEGE the right to edit, use, and reuse said products for
nonprofit purposes including us	se in print, on the internet, and all other forms of media.
I also hereby release AMERICAN	N BAPTIST COLLEGE and its agents and employees from all claims,
demands, and liabilities whatso	ever in connection with the above.
Signature of Parent/Guardian (i	f Student is under 18):
	Date:
Address of Parent/Guardian:	
OR	
Signature of Student (if 18 or ov	ver):
	Date:
Address of Student:	