

Print Name	Signature (Parent/Guardian Signature of Minor Under Age 18)	Date	Student ID#
1 _____	: _____	: _____	: _____
2 _____	: _____	: _____	: _____
3 _____	: _____	: _____	: _____
4 _____	: _____	: _____	: _____
5 _____	: _____	: _____	: _____
6 _____	: _____	: _____	: _____
7 _____	: _____	: _____	: _____
8 _____	: _____	: _____	: _____
9 _____	: _____	: _____	: _____
10 _____	: _____	: _____	: _____

The Family Educational Rights and Privacy Act and the Washington Administrative Code 504-21-010 prohibit Pierce College's release of a student's educational records, other than directory information, without a signed release from the student. The photographs, interview comments and your name constitute educational records under those laws.

By signing I (we) give Pierce College permission to photograph me (my child) and publish, use and distribute my (my/our child's) photographic likeness for promotional and educational purposes. I (We) also grant Pierce College permission to publish, use and distribute my (my/our child's) name and/or interview comments for Pierce College promotional and educational purposes.

Promotional and educational purposes may include use and distribution in print and/or electronic media, including but not limited to publications, books, newspapers, brochures, pamphlets, television, videos, motion pictures and on web sites.

This agreement is binding on my (our) successors, assigns and/or heirs