

Appendix I – Photo Release and Publication Consent Form

Dental Assisting Program



For good and valuable consideration, I hereby consent and authorize Indian Hills Community College to reproduce, publish, circulate and otherwise use for advertising and instruction purpose:

- My name and/or signature
- Portrait and/or photograph
- Videotape/audiotape
- Other imaging
- Name of employer and the attached voluntary statement or statements or any part thereof

In the following:

- Magazines, newspapers, rotogravure sections of publications, booklets, circulars, posters, billboards
- Radio and/or television scripts, radio broadcast transcriptions and/or telecasts
- Websites including but not limited to IHCC website, Dental Assisting webpage, course webpages and other forms for publications or circulation, or any of them in advertising or any other publicity.

And I hereby release said Indian Hills Community College of and from any and all rights, claims, demands, actions or suits which I may or can have against it or them on account of the use or publication of said material.

Name: _____

Signature: _____ Date: _____