



CROWN COLLEGE

Publicity Opt-Out Request

Crown College may at times use photographs, audio, and/or video recordings of its students and employees for purposes of education, publicity, and student recruitment on behalf of the college. The resulting media may appear in printed pieces, on the Internet (including social media) and in other media as well.

If you as an employee, student, or parent/guardian of a student the age of 18 do NOT want to be photographed or recorded, or have your name or biographical information used in connection with any such recording, you must complete the form below and submit it to the Marketing Department.

The Publicity Opt-Out Request is effective for one year (August 1–July 31). It must be accompanied by a current photo of the individual seeking to opt out and must be renewed each year in order to remain valid. Additional information is available in the Students section of the website. Please be advised that:

1. Images and videos taken in public spaces and/or at public events do not require authorization for publication.
2. It is your responsibility to notify personnel you have signed the opt-out release

I do not authorize Crown College or its officers, employees or agents, to record my photographs or other images or likenesses in the form of audio, video, or any other medium, or to use, reproduce, modify, distribute, or publicly exhibit such recordings, in whole or in part, for any promotional purposes. Further, I do not consent to the use of my name, voice, or biographical material in connection with any such recording.

I hereby confirm that I am of legal age (18) and have every right to contract in my own name as stated above. I further affirm that I have read the above "Publicity Opt-out Request," and am familiar with its contents.

Date: _____ Name: _____
 Address: _____
 City: _____ State: _____ ZIP: _____
 Phone: _____ Email: _____
 Signature: _____

I hereby confirm that I am the parent or guardian of the student named above. I further affirm that I have read the above "Publicity Opt-out Request," and am familiar with its contents.

For students under 18
 Parent/guardian name: _____
 Parent/guardian signature: _____

Please return this completed form along with a current photo to the Marketing Department.

For Office Use Only

Processed by: _____ Date: _____