Release Form

Name ___________________________________________________________ Gender M F

Major(s) __________________________________ Minor(s) _______________________

Home Address __________________________________________________________

Mother’s Name __________________________________________________________

Mother’s Address _________________________________________________________

Father’s Name ____________________________________________________________

Father’s Address _________________________________________________________

*Hometown Paper(s) and Address(es) -
(We must have city and state for each paper to ensure releases are sent to appropriate places.)

1. ________________________________________________________________

   ________________________________________________________________

2. ________________________________________________________________

   ________________________________________________________________

*High School and Address: _____________________________________________

☐ By marking this box, I am authorizing the Marietta College Office of
College Relations to use this information in news releases to my hometown media.

☐ NO! I do not want news releases sent out about me by Marietta College.

Photo Release

☐ I hereby grant permission to Marietta College to use my photograph (or my child’s photograph) on its
World Wide Web site or in other official College printed publications/advertisements without further
consideration, and I acknowledge the College’s right to crop or treat the photograph at its discretion. I
also acknowledge that the College may choose not to use my photo at this time, but may do so at its
own discretion at a later date.

Signature ____________________________ Date ________________________________

Parent or Guardian (If student is under the age of 18)