



Public Affairs Release Form

Date: _____

I authorize Galveston College to use my name, statements and likeness, without charge, for promotional purposes in college publications, advertising, video, web, new media or other formats.

Name: _____

Signature: _____

E-mail Address: _____

Phone: _____

Address: _____

If under 18, parent name and signature also required:

Parent's Name: _____

Signature: _____