



Marketing and Communications Office

Promotions Acknowledgement Form (Parent/Guardian)

I, the undersigned parent/guardian of _____, a minor, do hereby authorize and consent to the usage of his/her photograph/video in Marketing and Integrated Brand Promotions collaterals of Miriam College SY _____ which will be released on _____. This is for the purpose of advertising and promotions of Miriam College.

The photographs will be made available in flyers, banner-ups, posters and other marketing collaterals for the aforementioned purposes.

The videos will be made available in social media platforms, school website, events and other marketing collaterals for the aforementioned purposes.

I, therefore, agree that I shall have no claim against Miriam College or anyone accessing this communication collateral, whether online, in print or by any other means.

This authorization shall remain effective for the duration of the promotions, unless sooner revoked in writing delivered to Miriam College.

Date

Signed: _____

Address: _____

City: _____

Phone No.: Home (____) _____

Work (____) _____

Cell (____) _____



Marketing and Communications Office

Promotions Acknowledgement Form (Student)

I, _____, do hereby consent to the usage of my photograph/video in Marketing and Integrated Brand Promotions of Miriam College SY _____ which will be released on _____. This is for the purpose of advertising and promotions of Miriam College.

The photographs will be made available in flyers, banner-ups and other marketing collaterals for the aforementioned purposes.

The videos will be made available in social media platforms, school website, events and other marketing collaterals for the aforementioned purposes.

I, therefore, agree that I shall have no claim against Miriam College or anyone accessing this communication collateral, whether online, in print or by any other means.

These authorizations shall remain effective for the duration of the promotions, unless sooner revoked in writing delivered to Miriam College.

Date

Signed: _____

Address: _____

City: _____

Phone No.: Home (____) _____

Work (____) _____

Cell (____) _____