

STUDENT MEDIA RELEASE

During your time at school, there will be many opportunities for the School of Pharmacy to do press releases about you and your accomplishments, i.e. scholarships, awards, Dean’s list, etc. In order to publish this material, it is necessary for you to complete the release form below. **Please return the form to Student Services, School of Pharmacy, 1300 Coulter, Amarillo, TX 79106**

Enrolled in: School of Pharmacy – Pharm.D.

Name: _____
Last First Middle

Female: _____ Male: _____ Telephone No.: _____

Local Address: _____

_____ City State Zip Code

Permanent Address: _____

_____ City State Zip Code

Father’s Name: _____

Address/City/State/Zip: _____

Father’s Local newspaper(s): _____
Name City/State

Mother’s Name: _____

Address/City/State/Zip: _____

Mother’s Local newspaper(s): _____
Name City/State

Parents should be identified (check one) Mr. & Mrs. _____ By first Names _____
Individually _____ Other (specify) _____

I hereby authorize the release of information, photos, and/or videos concerning my participation at all events, activities, and organizations related to the Texas Tech University Health Sciences Center (TTUHSC) School of Pharmacy (SOP). This authorization grants TTUHSC and the SOP the right to use the information, photos and/or videos of the undersigned (or those in which the undersigned may be included) for materials related to editorial, trade, advertising, and marketing of TTUHSC and the SOP. This includes, but is not limited to: brochures and pamphlets; news releases; newspaper/magazine articles, stories, features; all other internal/external materials produced by TTUHSC and/or the SOP and/or its legal representatives and assigns.

Student Name Printed Student Signature Date