

Student Name:

Please Print

By signing both portions of this release form, you certify that you are at least 18 years of age and are competent to contract in your own name, you have read this release before signing below and fully understand the contents, meaning, and impact of this release, and you freely consent to its contents. If you are under 18 years of age then a parent signature is also required. This consent will be valid throughout your continuous enrollment. You may make changes at any time by contacting registrar@sjasc.edu.

Release of Information:

I hereby authorize Saint Joseph Seminary College to release my grades, transcripts, documents, financial aid information, and any other information pertaining to my enrollment at the seminary college to my vocation director, bishop or religious superiors, my formation advisor, and any other individual as indicated below.

Authorized individuals not mentioned above:

| Name | Relationship | |
|--|--------------|------|
| Name | Relationship | |
| Name | Relationship | |
| Student Signature | Date | |
| Parent Signature (if student under 18) | | Date |

Photo and Video Release:

I hereby grant permission to Saint Joseph Abbey and Seminary College to take and use my likeness in all photograph or video media in any and all of its publications, including website entries, without payment or any other consideration.

I understand and agree that these materials will become the property of the above listed agencies and organizations and will not be returned.

I hereby, irrevocably authorize the above listed agencies and organizations to edit, alter, copy, exhibit, publish or distribute this media for the purposes of publicizing their programs or for any purposes that may arise in the future so as long as it does not conflict with the moral code of the Roman Catholic Church. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness appears. Additionally, I waive any right to royalties or any compensation arising or related to the use of the media.

I hereby hold harmless and release and forever discharge the above listed agencies and organizations from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

| Student Signature | Date |
|--|------|
| Parent Signature (if student under 18) | Date |