

## **Bank of Marin 2025 Community Calendar Photo Submission Form**

| Student Name:  |  |   |
|--|--|---|
| Student Full Address:  |  |   |
| Student Phone:   | Student E-mail:  |   |
| High School:   |  | Grade:  |
| Teacher's Name:  |  |   |
| School Address:  |  |   |
| Teacher Phone:   | Teacher E-mail:  |   |
| Title of Print:  |  |   |
| Description of photo and location where  | photo was taken:   |   |
|  | Photo Release  |   |
| I hereby grant permission for Bank of Maschool name for promotional purposes. I owns any and all rights to said photograparent/legal guardian needs to sign. | I agree that I have received no con<br>phy or promotional write-up of mo | mpensation and that Bank of Marin<br>e. If student is under the age of 18, <b>a</b> |
| Student Name (Printed):  |  |   |
| Student Signature:   |  |   |
| Parent/Legal Guardian Name (Printed): _  |  |   |
| Parent/Legal Guardian Signature:   |  |   |
| Date:  |  |   |

## Submission Requirements due Friday, September 27, 2024.

- Completed submission form. Please review your form before submitting; incomplete forms will not be considered.
- Digital photo in high resolution 300dpi and jpeg or tiff format
- No smaller than 7.0" h x 10.5" w (2100 x 3150 pixels)
- Color or black & white photo should represent your local community. However, photos with recognizable faces cannot be accepted.
- Maximum of three photo submissions per person
- Send submission form and digital photo to Bank of Marin at communityrelations@bankofmarin.com