

Date:        /        /

# PHOTO RELEASE FORM

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#                    Initiator:                    |

## 1.                    **AGREEMENT**

1.1                    I hereby grant permission to \_\_\_\_\_ to  
use photographs of me taken on \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (mm.dd.yy) at  
\_\_\_\_\_ (Location address) in  
publications, news releases, online, and in other communications related to  
the mission of \_\_\_\_\_  
\_\_\_\_\_ (Client/Company).

1.2

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( ↑ Signature of Adult, or Guardian of Children under age 18)

## 2.                    **CONTACT INFORMATION**

2.1                    Name:

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2.2                    Address (optional):

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2.3                    Phone (day):

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2.4                    Email Address:

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