

Photograph Consent Release Form

I hereby authorize and grant permission to

to use photographs of me for lawful purposes including publicity, illustration, advertising, and web content.

Details

Full Name of Subject:

Address:

Contact Number:

Email Address:

Consent

I understand that the photographs may be used for various purposes and may be distributed in the public domain.

Additional Notes or Restrictions (if any):

Signature:

Date:

If under 18, Parent/Guardian Name:

Parent/Guardian Signature:

Date: