

Culinary Tour Photo Release Form

Participant Name:

Date:

Permission

I grant permission to the organizers of the Culinary Tour to use photographs and/or video taken of me during the event for promotional, educational, or any other lawful purposes in print, digital, and online formats, without compensation.

☐ I have read and agree to the terms above.

Signature:

Date:

Parent/Guardian Name (if participant is under 18):

Signature:

Date:
