Release of Liability Form for Photography/Videography Sessions

This agreement is made between the undersigned participant ("Participant") and the photographer/videographer ("Photographer"), regarding participation in photo/video sessions.

Participant Information

Full Name
Address
Email
Phone Number
Session Details
Date of Session
Location
Release Terms
By signing below, Participant agrees to release and discharge Photographer from any and all claims, demands, or causes of action that may arise out of or in connection with the use of photographs or videos, including any and all liability for libel or violation of any right of publicity or privacy.
Participant acknowledges that participation is voluntary, and assumes full responsibility for any risks, injuries, or damages.
I have read and agree to the terms of this release.
Signature
Date
Date