Photography Release Waiver

If under 18, Parent/Guardian Name:

Parent/Guardian Signature:

Date:

I hereby grant permission to ("Photographer") to use photographs and/or video taken of me on at for use in: Promotional materials Publications • Website and social media • Other related purposes I understand and agree that these materials will become the property of the Photographer and will not be returned. I hereby irrevocably authorize the Photographer to edit, alter, copy, exhibit, publish, or distribute these photos for any lawful purpose. In addition, I waive any right to inspect or approve the finished product. I acknowledge that I am over 18 years of age, have read and understand the above release, and agree to its terms. Name (Print): Signature: Date: