Photo Release Form

[Organization or Photographer Name]

AGREEMENT

Date of Photos: _____ Location: _____

TERMS

1. **Permission.** I give [Organization or Photographer Name] (the “Organization”) permission to use photos and video of me (the “Images”) for any lawful purpose, including websites, social media, print and advertising. This permission is irrevocable.
2. **Editing.** The Organization may crop, retouch or otherwise edit the Images, and does not need my approval before using them.
3. **Compensation.** I will not be paid for this release or for any use of the Images.
4. **Ownership.** The Organization owns the Images, including all copyrights.
5. **Release.** I release the Organization from any claims related to the use of the Images.

I have read and understand this release, and I am at least 18 years old.

SIGNATURE

_____ _____

Signature Date

_____

Printed Name

_____

Email or Phone (optional)

Sample only, not legal advice. Consult an attorney for your jurisdiction.