

Model Release Form

Photographer's Name

Model's Name

Parent, Guardian or Legal Representative's Name

If Model is a minor and under eighteen (18) years of age
(or twenty one (21) in certain counties/states)

Production Date

(Date on which photograph's were taken)

Place Model's Photo Here

For valuable consideration received, I hereby grant Photographer the irrevocable right and permission, throughout the world, in connection with the photographs you have taken of me on the Production Date above, or in which I may be included with others, the following : (a) the right to use and re-use, in any legal manner at all, said photographs, in whole or in part, modified or altered, either by themselves or in conjunction with other photographs, in any medium or form of distribution, and for any legal purposes whatsoever, including without limitation, all promotional and advertising uses, and other trade purposes, and (b) the right to copyright said photographs in your name. I waive the right to inspect or approve any use thereof.

I hereby forever release and discharge Photographer from any and all claims, actions and demands arising out of or in connection with the use of said photographs, including without limitation, any and all claims for invasion of privacy and libel. This release shall inure to the benefit of the assigns, licensees and legal representatives of Photographer, as well as the party(ies) for whom Photographer took said photographs.

MODEL/PARENT/GUARDIAN INFORMATION

Please tick the relevant box below:

I represent that I am the age of eighteen (18) years (or twenty one (21) in certain counties/states) or above and that I have read the foregoing and fully and completely understand the contents hereof.

or

I represent that the model is a minor and that I am the parent / duly authorized representative of the model and that I have read the foregoing and fully and completely understand the contents hereof.

Model's or Parent's Signature :

Model's Permanent Address :

WITNESS INFORMATION

Name (Print) :

Signature :

Date : _____