

# Photograph Release Form

I, hereby grant permission to \_\_\_\_\_ (Model's full name) to reproduce any portion of the photo images listed below that have been taken by me \_\_\_\_\_ ( Photographer's full name) for the purpose of SELF USE and or SELF PROMOTION publications which can include but is not limited to, books, cards, calendars, invitations and websites without any more compensation or recognition given to me.

Furthermore, I grant creative permission to alter the photograph(s). I do not grant permission to resale or use the photographs in a manner that would exploit or cause malicious representation toward me or my company and associates.

Permission granted for photographs listed below:

<b>Date Taken:</b>	<b>Picture or bundle description</b>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Any infringements of this policy may violate federal law.

### Photographer Information:

Full Name: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Signature: \_\_\_\_\_  
 Date: \_\_\_\_\_

### Model Information:

Full Name: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Signature: \_\_\_\_\_  
 Date: \_\_\_\_\_

### Witness Information (Optional):

Name: \_\_\_\_\_  
 Signature: \_\_\_\_\_  
 Date: \_\_\_\_\_