



Photography by E

Photo Release Form

Client Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Permission to use Photograph

Event: _____

Location: _____

I, _____ authorize Photography by E to use photos of me and/or my property and authorize him/her/their and his/her/their assignees, licenses, legal representatives and transferees to use and publish (with or without my name, company name or with a fictitious name) photographs, pictures, portraits or images herein described in any and all forms and media and in all manners including composite images or distorted representations and the purpose of publicity, illustration, commercial art, advertising, publishing (including publishing in electronic form in CD's or internet websites), for any product or services or other lawful uses as may be determined by Photography by E.

I have read and understand the above:

Signature _____

Printed Name _____ Date _____

Signature, parent or guardian _____

(if under age 18)

Printed Name _____ Date _____