

Photo Model Release Form

I, _____ (please print), grant permission to
_____ (photographer _____) to reproduce the
photographs taken of me, or members of my family, for the purpose of publication, promotion,
illustration, advertising, or trade, in any manner or in any medium.

I acknowledge that I am over the age of 18
 the legal guardian of the following

If legal guardian of model(s), please list name(s) here:

Signature _____

Date _____

Address _____
