

INTERNAL PHOTO RELEASE FORM

I hereby grant _____ permission to the rights of my image without payment or any other consideration. I understand that my images may be edited, copied, exhibited, published or distributed, and I waive the right to inspect or approve the finished product wherein my likeness appears. I also understand that this material may be used in marketing and recruitment settings.

By signing this release, I give permission to share images of my likeness via the internet or in a public setting. There is no time limit on the validity of this release, nor is there any geographic limitation on where these materials may be distributed. I also waive any right to royalties or other compensation related to the use of my image.

By signing this form, I acknowledge that I have completely read and fully understand the above release and agree to be bound thereby. I also acknowledge that I am over 18 years of age.

Full Name _____

Signature _____ Date _____

If this release is obtained from a person under the age of 19, then the signature of that person's parent or legal guardian is also required.

Parent's Signature _____ Date _____