

**CLIENT PHOTO RELEASE FORM**

I hereby grant permission to *The Imagery*, and it’s photographers to use photographs and/or video of me/us taken on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ in publications, news releases, online, and

in other communications related to the mission of *The Imagery*.

(Signature of Adult, or Guardian of Children under age 18)

Children’s Name(s) and ages:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Thank you!

The ImageryPhotography

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