

Photo/Video Release and Waiver Form

I hereby grant permission to **Organization Name** to use my photograph and/or video in any and all of its publications, including website entries, without payment or any other consideration. I understand and agree that these materials will become the property of **Organization Name** and will not be returned.

I hereby irrevocably authorize **Organization Name** to edit, alter, copy, exhibit, publish, or distribute this photo or video for purposes of publicizing their programs or for any other lawful purpose.

I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness appears. I waive any right to royalties or other compensation arising or related to the use of the photograph or video.

Full Name:

Signature:

Date:

Parent/Guardian Name (if minor):

Parent/Guardian Signature:

Date: