

MODEL RELEASE AND AUTHORIZATION TO PHOTOGRAPH

FOR GOOD AND VALUABLE CONSIDERATION herein acknowledge as received, and by signing this release I hereby give the Photographer/Filmmaker and Assigns my permission to license the Images and to use the Images in any Media for any purpose (except pornographic or defamatory) which may include, among others, advertising, promotion, marketing and packaging for any product or service. I agree that the Images may be combined with other images, text and graphics, and cropped, altered or modified. I acknowledge and agree that I have consented to publication of my ethnicity(ies) as indicated below, but understand that other ethnicities may be associated with Images of me by the Photographer/Filmmaker and/or Assigns for descriptive purposes.

I agree that I have no rights to the Images, and all rights to the Images belong to the Photographer/Filmmaker and Assigns. I acknowledge and agree that I have no further right to additional Consideration or accounting, and that I will make no further claim for any reason to Photographer/Filmmaker and/or Assigns. I acknowledge and agree that this release is binding upon my heirs and assigns. I agree that this release is irrevocable.

Please check one:

_____ I represent that I am over the age of eighteen (18) years and that I have the full legal capacity to execute this release.

_____ I represent that the model is a minor and that I am the parent or duly authorized representative of the model and that I have read the foregoing and fully and completely understand the contents hereof.

Photographer/Filmmaker Information

Name:	Edward J. Chevalier
Address:	209 Rustic Acres Selma, TX 78154
Phone:	(210) 722-6489
Email:	contact@mephotosa.com
Shoot Date:	
Description:	
Signature:	
Date:	

Model Information

Name:	
Address:	
Phone:	
Email:	
Birth Date:	
Signature:	
Date:	

Additional Information (optional)

Ethnicity information is requested for descriptive purposes only, and serves as a means of providing more accuracy in assigning search words.	
<input type="checkbox"/> Asian	<input type="checkbox"/> Caucasian, White
<input type="checkbox"/> Hispanic, Latin	<input type="checkbox"/> Middle Eastern
<input type="checkbox"/> Native American	<input type="checkbox"/> Pacific Islander
<input type="checkbox"/> Black	<input type="checkbox"/> Mixed Race
<input type="checkbox"/> African American	
<input type="checkbox"/> Other: _____	

Parent(s) or Guardian(s)

Parent warrants and represents that Parent is the legal guardian of Model, and has the full legal capacity to consent to the Shoot and to execute this release OF ALL RIGHTS IN MODEL'S IMAGES.	
Name:	
Address:	
Phone:	
Email:	
Signature:	
Date:	

Witness

Name:	
Signature:	
Date:	