

Model Release Form

Photographer: _____

Shoot date: _____

Photographer's Signature: _____

Model's Permission and Rights Granted

For good and valuable Consideration of _____ herein acknowledged as received and by signing this release I hereby give the Photographer and Assigns my permission to license the Images and to use the Images in any Media for any purpose (except pornographic, defamatory, libelous, or otherwise unlawful) 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 agree that I have no rights to the Images, and all rights to the Images belong to the Photographer 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 and/or Assigns. I acknowledge and agree that this release is binding upon my heirs and assigns. I agree that this release is irrevocable, worldwide and perpetual, and will be governed by the laws of the United States and the State of Florida.

To be completed by the model or model's parent or legal guardian (for minors):

Model / Parent / Legal Guardian

Date: _____

Signature: _____

Printed name: _____

Model's Date of Birth: _____

Telephone: _____

Email: _____