

Photographer's Release Form

_____ hereby authorizes _____ and
Name of photographer Name of School
_____ to use my(our) photograph(s) of the students and faculty
Name of organization
of _____ for the specific purpose of creating a collage
Name of School
of the photos in a school authorized design to be printed on a garment or poster for sale to the
students and faculty of that school. In giving my(our) consent, I(we) hereby release and hold harmless
the _____ or _____ from any
Name of School Name of organization
and all responsibility or liability derived from using the photographs for the above described purposes.
I(We) understand that I(we) will not receive compensation should the photographs be used for either
of the above stated purposes.

Date Signed _____

Signature of authorizing agent _____

By _____ for _____
Print Name Print Name of Photographer