

1436 Rolling Acres Dr. Argyle, TX 76226 Phone: 940-464-7730 email: cjpphotography@live.com

Making memories affordable

MODEL RELEASE

| I,, for goo | od and valuable consideration, the receipt of | | |
|--|---|---|--|
| which is hereby acknowledged, hereby irrevocably authorize <u>CJP Photography</u> to use | | | |
| photographs of me and or my property and authorize him and his assignees, licensees, | | | |
| legal representatives and transferees to use and publish (with or without my name, | | | |
| company name or with a fictitious name) photographs, pictures, portraits or images herein | | | |
| described in any and all forms and media and in all manners including composite images or distorted representations, and the purposes of publicity, illustration, commercial art, advertising, publishing (including publishing in electronic form on CDs or internet websites), for any products and services, or other lawful uses as may be determined by the | | | |
| | | photographer named here. I further waive any and all rights to review or approve any uses | |
| | | of the images, any written copy or finished product. I have read and fully understand the | |
| | | terms of this release. | |
| | | | |
| | | | |
| Dated: | | | |
| Dated: | Phone: | | |
| | Phone: | | |
| Address: | Phone: | | |
| Address: | Phone: | | |
| Address: City: State / Zip: | Model (signature): | | |
| Address: City: State / Zip: Model Name: | Model (signature): | | |
| Address: City: State / Zip: Model Name: Witness Name: | Model (signature): Witness (signature): parent or legal guardian of the above mentioned minor and | | |
| Address: City: State / Zip: Model Name: Witness Name: If model is a minor (under the age of 17), I am the p | Model (signature): Witness (signature): parent or legal guardian of the above mentioned minor and ove release on behalf of the minor. | | |
| Address: City: State / Zip: Model Name: Witness Name: If model is a minor (under the age of 17), I am the phave the legal right and authority to execute the above | Model (signature): Witness (signature): parent or legal guardian of the above mentioned minor and ove release on behalf of the minor. | | |