SAMPLE Photo Release Form

I hereby give permission to the Recreation and Parks Association of the Yukon to record my/our photograph(s). I understand that the likeness of me may be used by RPAY and RPAY’s funders in a number of ways such as websites, publications or advertising, provision of information to the public, and/or promotion of programs and activities to promote active, healthy lifestyles.

I acknowledge I have read and understood the contents of this form. I hereby release the above-noted organization, its employees, agents, subcontractors and funders from any and all claims, actions and liability for damages, losses or expenses of any sort which may arise in connection with the use of these likenesses or recorded stories.

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| I hereby give my consent, dated this | | | | | |  | | day of |  | 201 |  |  |
| Signed: | | |  | | | | | | |  | | |
| Print Name: | |  | | | | | | | |  | | |
| Name of organization | | | | (if applicable) | | |  | | | | | |
| Address: |  | | | | | | | | | Phone: | |  |
| Signature of Parent or Guardian if subject is under age 19: | | | | |  | | | | | | | |

Photo(s) Name/Number: