

PHOTOGRAPHIC RELEASE FORM



I, _____,
(printed name)

grant the Illinois Audubon Society (IAS) the right to take my photograph and agree that the image will become the property of IAS and will not be returned.

I agree that IAS has the right to reproduce, prepare products using, distribute or display these materials in whole or in part for purposes meeting the IAS mission, including, but not be limited to, publications, websites and project publicity.

I waive the right to inspect or approve use of the material and any right to royalties or other compensation arising or related to the use of the material, I agree to indemnify, hold harmless, and release and forever discharge IAS from all claims, demands and causes of action which I, my heirs, representatives, executors, administrators or any other persons active on my behalf or on behalf of my estate have or may have by reason of this authorization.

I am 18 years of age or older and am competent to contract in my own name. I have read this release before signing below and I fully understand the contents, meaning and impact of this release.

Signature: _____ Date: _____

Printed Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ email: _____

A parent or guardian must also sign if the person is under age 18.

I hereby certify that I am the parent/guardian and give consent to the foregoing on behalf of this person.

Parent/Guardian's Signature/Date: _____

Parent Guardian's Printed Name: _____

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