

## Photo Release Form



I, the undersigned, do hereby consent and agree that the Judith Basin Chamber of Commerce, its employees, or agents have the right to use the photographs provided/submitted, take photographs, and to use these in any and all electronic and print media, social media, website, and publications, now or hereafter known, and exclusively for the purpose of use in any/all of the "Furrows and Trails Part II" publications. I further consent that my name and identity may be revealed therein or by descriptive text or commentary.

I do hereby release to Judith Basin Chamber of Commerce, its agents, and employees all rights to exhibit this work in print and electronic form publicly or privately and to market and sell copies. I waive any rights, claims, or interest I may have to control the use of my identity or likeness in whatever media used.

I acknowledge that since my participation with Judith Basin Chamber of Commerce is voluntary, I will receive no financial compensation.

I hereby irrevocably authorize the Judith Basin Chamber of Commerce to edit, alter, copy, exhibit, publish or distribute this photo/photos for purposes of publicizing Judith Basin Chamber of Commerce's programs or for any other related, lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of any / all photographs submitted for use.

I hereby hold harmless and release and forever discharge the Judith Basin Chamber of Commerce from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

I represent that I am at least 18 years of age, have read and understand the foregoing statement, and am competent to execute this agreement.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Business Name (if applicable): \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Signature: \_\_\_\_\_