

THE COMMONWEALTH OF MASSACHUSETTS

EXECUTIVE OFFICE OF ENERGY AND ENVIRONMENTAL AFFAIRS



Department of Agricultural Resources

251 Causeway Street, Suite 500, Boston, MA 02114
617-626-1700 fax: 617-626-1850 www.mass.gov/agr



Faces of Massachusetts Agriculture *INFORMATION AND RELEASE FORM*

Photograph Subject Information
Name
Farm/Business/Organization
Title
Address
City
Phone
Email
Affiliation with MDAR (please tell us about programs you participate in or other connections you may have with the Department):
Brief biographical information (please tell us a little bit about yourself – your occupation, interests, education, organizations, awards, family, etc.):

Please read, complete, and sign the release statements and mail, fax, or scan this form to the address below. Digital photos may be sent via email to Anna.Waclawiczek@state.ma.us.

Mailing address:

MDAR

Attn: Anna Waclawiczek

251 Causeway St., Suite 500

Boston, MA 02114

Tel. 617.626.1703 Fax: 617.626.1850

Release Statement Cont.:

If you are the subject of the photograph(s), please read, date, and sign below

Standard Release Form:

On this _____ day of _____ (month/year), I, the undersigned, grant the Massachusetts Department of Agricultural Resources or its authorized agents the right to use photographs of me, my child or ward and/or my property for informational, publicity, or promotional purposes without prior notification. I understand that these photographs may appear in printed materials published by the Department, on the Department's website, in Department presentations or exhibits, in newspapers, magazines, television, or other social media networks e.g. blogs, Facebook, etc. I agree to hold the Department harmless from all claims related to the Department's or its agents' use of these photographs for these purposes without prior notification and without compensation. I also agree that the Department is under no obligation to me or any other party to use these photographs. By my signature below, I represent that I have read and fully understand this Standard Release Form, and that either I am at least eighteen years of age.

Signature

Print Name

Statement of Ownership and Responsibilities:

On this _____ day of _____ (month/year), I, the undersigned, attest that each photograph described above is my own creation and that I have full and total rights to this material. I have included signed Standard Release Forms from all persons and property pictured in each photograph. I accept all liability from each photograph, and I grant the Massachusetts Department of Agricultural Resources the right to offer and display each photograph for informational, publicity, or promotional purposes without prior notification and without compensation. I also agree that the Department is under no obligation to me or any other party, to use these photographs. By my signature below, I represent that I have read and fully understand this Statement, and that I am at least eighteen years of age.

Signature

Print Name