

MEDIA ESSENTIALS: SAMPLE PHOTO RELEASE FORM

I give permission to the **(NAME)** Recycling Department to use my photo and name in any and all publicity efforts. I understand that this photo is for a print advertisement that will be placed in my local newspaper.

By signing this agreement, I relinquish any monetary claims, and agree to hold the **(NAME)** Recycling Department harmless for any liability arising from participation. I state that I have no conflicts of interest with the subject matter and that I enter into this agreement of my own free will.

Signed

Date

Signature of Guardian (if under 18)

Witness

Print Name

Address

City/State/Zipcode