

PHOTO RELEASE FORM

I hereby grant the NJAASC permission to use photos of _____(me) and _____(name of entity) in any and all of its materials and publications, including web-based publications, without payment or other consideration.

I understand and agree that all photos will become the property of the NJAASC and will not be returned.

I hereby irrevocably authorize the NJAASC to edit, alter, copy, exhibit, publish, or distribute these photos for any lawful purpose. In addition, I waive any right to inspect or approve the finished product wherein the photo appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photo.

I hereby hold harmless, release, and forever discharge the NJAASC from all claims, demands, and causes of action, which I or my organization have or may have by reason of this authorization.

**I HAVE READ AND UNDERSTAND THE ABOVE PHOTO RELEASE.
I AFFIRM THAT I AM AT LEAST 18 YEARS OF AGE.**

We, the Releasor and Releasee, understand and agree to the aforementioned terms and conditions.

Releasor's Signature _____ Date _____

Print Name _____ Date _____

Releasee's Signature _____ Date _____

Print Name _____ Date _____

