

PHOTOGRAPHY RELEASE



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_____ I understand that there shall be no payment for this release.

_____ I understand that there shall be no royalty, fee, or other compensation shall become payable to me by reason of such use.

_____ I understand that I may revoke this authorization at any time by notifying the Releasee in writing. The revocation will not affect any actions taken before the receipt of this written notification. Images will be stored in a secure location and only authorized staff will have access to them. They will be kept as long as they are relevant and after that time destroyed or archived.

I understand and agree to the aforementioned terms and conditions.

Releasor’s Signature: _____

Date: _____