

MODEL RELEASE FORM MINOR

I (the Parent/Legal Guardian) explicitly grant to the photographer (the Photographer) and to his/her assignees and licensees the absolute right and permission to use, publish or sell the photograph(s) referred to below, in which my child/ward (the Model) is included, in any medium, throughout the world, without any restriction whatsoever as to the nature of the use or publication or as to the copy of any printed matter accompanying the photograph(s). I understand that the images may be altered and I waive the right to approve of any finished product. I understand that I do not own the copyright of the photograph(s).

I certify that I am over 18 years of age and that I have the full legal right to execute this agreement.

TO BE COMPLETED BY PARENT/LEGAL GUARDIAN:

Model's name: _____

Model agency: _____

Model's address: _____

Parent/Legal Guardian phone: _____

Parent/Legal Guardian email: _____

PHOTOGRAPH

Model's ethnicity: (Optional) Ethnicity information is requested for descriptive purposes and keyword accuracy only.

_____ Asian (please circle which applies to you ; Chinese, Indian, Japanese, Korean, Asian - other) _____ Black _____ African American
_____ Pacific Islander _____ Caucasian, White _____ Middle Eastern _____ Mixed Race _____ Other (please state)

Parent/Legal Guardian Signature: _____ **Date:** _____

Parent/Legal Guardian Printed Name: _____

Model's Date of Birth: _____

TO BE COMPLETED BY WITNESS:

Name of Witness: _____

Signature of Witness: _____ **Date:** _____

TO BE COMPLETED BY PHOTOGRAPHER:

Photographer's name: _____

Photographer's signature: _____

Shoot date: _____

Shoot description: _____