

GOLDEN AGE PHOTOS & ART, LLC

MODEL RELEASE

By signing this form, I (print your name) _____ hereby give photographer Marjorie Bull / Golden Age Photos & Art, LLC permission to create, license, publish, and use photographs of the person named below as Model, in any media (e.g. print, digital, etc.) now known or yet to be invented, for any legal purpose including (among others) art, marketing, and packaging for any product or service. I agree that the photos may be cropped, modified, composited, and/or used in conjunction with other photos. This right shall be irrevocable, and inure to the benefit of her heirs, assigns, legatees, agents, employees, assistants, and persons for whom she is acting, to save and hold harmless against all claims of defamation, invasion of privacy, and libel.

I understand that the pictures are the copyrighted intellectual property of Marjorie Bull / Golden Age Photos & Art, LLC, and may not be reproduced without permission. In exchange for the permission granted by me above, I will receive web-resolution digital copies of any photos I select for purchase. Marjorie Bull / Golden Age Photos & Art, LLC grants me the right to reproduce these photos for my personal use, including the making of prints and posting on social media so long as the copyright notice and/or watermark is included and no further editing (apart from cropping to fill a space) is performed. Commercial, artistic, and all other rights are reserved by the photographer.

It is agreed that my personal information will not be made publicly available but will only be used in direct association with the photos where necessary for purposes of production of media, legal identification, business and professional record-keeping, and related matters.

I represent and warrant that:

- (1) I am at least 18 years of age and have the full legal capacity to execute this contract/release
- (2) I am the parent/legal guardian of the minor child/dependent person named below (if applicable)
- (3) I have read and understood the contents of this agreement.

Model's Information

check box if model is a minor or dependent person

Name (Print) _____

Date of Birth ____ / ____ / ____ Age in photo _____

Model OR Parent/Guardian's Information

Name (Print) _____ Client ID _____

Street Address _____

City, State, Zip _____

Phone (____) _____ - _____ Email _____

Signature _____ Date Signed ____ / ____ / ____

Photographer's Information

Marjorie Bull / Golden Age Photos & Art, LLC Photo Shoot Date ____ / ____ / ____

Signature _____ Date Signed ____ / ____ / ____