

2025 Albany Visitors Association Photo Contest

Model Release

Photographer:	
Location:	Date:
Address:	c/o Albany Visitors Association, 122 Ferry St SW, Albany OR 97321

For consideration which I acknowledge, I irrevocably grant to the Photographer and their assigns, licensees, and successors the right to use my image and name in all forms and media including composite or modified representations for all purposes, including advertising, trade, or any commercial purpose throughout the world and in perpetuity. I waive the right to inspect or approve versions of my image used for publication or the written copy that may be used in connection with the images.

I release the Photographer and its assigns, licensees, and successors from any claims that may arise regarding the use of my image, including any claims of defamation, invasion of privacy, or infringement of moral rights, rights of publicity, or copyright. The Photographer is permitted, although not obligated, to include my name as a credit in connection with the image.

The Photographer is not obligated to utilize any of the rights granted in this Agreement.

I have read and understood this agreement and I am over the age of 18. This Agreement expresses the complete understanding of the parties.

Model(s)

Address/contact information:

If the person signing is under 18 consent should be given by parent or guardian as follows. I hereby certify that I am the parent or guardian of:

The model names above, and for values received, I do give my consent without reservations to the foregoing on behalf of him or her or them.

Notes/Exceptions:_____

Signature of Model:

or (Signature of Parent or Guardian)

Date:_____