

PHOTOGRAPHY CONSENT FORM - Under the age of 18

This form is to be completed by the individual(s) parents or guardians if subject is less than 18 years of age before photographs are taken.

PHOTOGRAPHER

Signature

Date

PERSON(S) In Photograph

I hereby grant Alana Colp as my photographer the right to use the photographs from the photo shoot, and any reproductions or adaptations of the photographs for all general purposes in relation to Alana Colp's work including, without limitation, the right to use them in any public materials such as her website, social media, portfolio or whenever Alana chooses to do so.

NAME (please print) _____

ADDRESS _____

SIGNATURE _____ DATE _____

NAME AND ADDRESS OF PARENT/GUARDIAN IF PERSON BEING PHOTOGRAPHED IS LESS THEN 18 YEARS OF AGE

NAME (please print) _____

ADDRESS _____

SIGNATURE _____ DATE _____