



Photo Consent and Submission Form

Agreement for the Use of Photography

Photographer Information:

Name: _____

Address: _____

Phone Number: _____

Email Address: _____

By signing this agreement, I consent to the following:

- Sparwood Trails Alliance (STA) reserves the right to crop and adjust photos as required in order to size appropriately to meet our project requirements.
- The photographer is responsible for receiving consent for any visible person in the photograph prior to photo submission.
- The Sparwood Trails Alliance and board members shall not be liable to the photographer for any and all claims, losses, expenses, injuries or damages arising out of or any way related to this consent or the photographs as a result of any act or omission.
- Should your photo be chosen to use in our upcoming calendar fundraising project, the photographer understands that there is no compensation received for the use of photos.
- Should your photo be selected to be in the calendar, you will be contacted by the Sparwood Trails Alliance.
- Participation is strictly voluntary.
- Compensation for photos submitted is Nil.
- I have read and agree to the above information as well as all information in the "Photo Submission Information" document.

Signature of Photographer: _____

Date Signed: _____

Photographer Name:	
Please ensure the "File Name" is the name of your photo file so they can be matched up with locations, captions and quotes. Captions will be an appropriate length for a brief description or explanation of the photo.	
Photo 1	
File Name:	Location (mandatory):
Caption (optional):	Quote (optional):
Photo 2	
File Name:	Location (mandatory):
Caption (optional):	Quote (optional):
Photo 3	
File Name:	Location (mandatory):
Caption (optional):	Quote (optional):
Photo 4	
File Name:	Location (mandatory):
Caption (optional):	Quote (optional):
Photo 5	
File Name:	Location (mandatory):
Caption (optional):	Quote (optional):