PHOTOGRAPHIC RELEASE FORM

I, _______________________________________________________________,
(printed name)
grant the Illinois Audubon Society (IAS) the right to take my photograph and agree
that the image will become the property of IAS and will not be returned.

I agree that IAS has the right to reproduce, prepare products using, distribute or
display these materials in whole or in part for purposes meeting the IAS mission,
including, but not be limited to, publications, websites and project publicity.

I waive the right to inspect or approve use of the material and any right to royalties or
other compensation arising or related to the use of the material, I agree to indemnify,
hold harmless, and release and forever discharge IAS from all claims, demands and
causes of action which I, my heirs, representatives, executors, administrators or any
other persons active on my behalf on behalf of my estate have or may have by
reason of this authorization.

I am 18 years of age or older and am competent to contract in my own name. I have
read this release before signing below and I fully understand the contents, meaning
and impact of this release.

Signature: ___________________________________________ Date: __________
Printed Name: ___________________________________________
Address: _____________________________________________
City: ___________________________ State: _____ Zip: _______
Phone: (____) _________ email: ___________________________

A parent or guardian must also sign if the person is under age 18.
I hereby certify that I am the parent/guardian and give consent to the foregoing on
behalf of this person.

Parent/ Guardian’s Signature/Date: ___________________________
Parent Guardian’s Printed Name: ____________________________

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