



# Siskiyou Arts Council

Dear Participants,

We at the Siskiyou Arts Council sincerely hope you and/or your child is enjoying this activity. We request your permission to photograph you. Photos will be used by Siskiyou Arts Council, and the photographer. They will help publicize and promote Siskiyou Arts Council activities and arts education.

If you are willing for yourself and/or your child to be included in these photos, please sign the Model Release form below and return this to the Siskiyou Arts Council. Thank you so much for your participation

## Model Release

I hereby irrevocably consent to, and authorize the use and reproduction by the Siskiyou Arts Council, the photographer, and/or any party authorized by them, of any and all photographs which may be taken of myself or my child during a Siskiyou Arts Council supported activity or event for any purposes whatsoever without compensation to me. All photos shall remain the property of the photographer and/or Siskiyou Arts Council.

Child's name: \_\_\_\_\_

Adult's name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

(If release is for a child) I am the parent and guardian of the minor named above and have the legal authority to execute the above release. I have read this release and approve the foregoing.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_