

Photo/Video Model Release Form



User Information

First Name Current Location

Lori

Last Name

Partridge

Email

Lorip@gmail.com

Release Information

AUTHORIZATION TO USE PHOTOGRAPHS AND/OR AUDIO-VISUAL

I, (Name), hereby authorize (Photographer/Videographer), the (Company Name), or (Project or Project Sponsor) to use, reproduce, and/or publish photographs and/or video that may pertain to me - including my image, likeness and/or voice without compensation. I understand that this material may be used in various publications, public affairs releases, recruitment materials, broadcast public service advertising (PSAs) or for other related endeavors. This material may also appear on the Corporation's or project sponsor's Internet Web Page. This authorization is continuous and may only be withdrawn by my specific rescission of this authorization. Consequently, the Corporation or project sponsor may publish materials, use my name, photograph, and/or make reference to me in any manner that the Corporation or project sponsor deems appropriate in order to promote/publicize service opportunities.

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Name:

Lori Partridge

Photographer/Videographer:

David Cassidy

Project or Project Sponser:

Classic Comedy

Description of Material (Photos/Audio-Visual):

Photo Shoot package, sound track, video tape

Image 01 Image 02



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Authorization Signature

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Signature:

11/15/2019