

This photo release form will be used for all State of Florida–Department of Environmental Protection, Land and Recreation brochures, websites, displays, articles, magazines, programs, advertisements or events.

Photo Release for Adults

I, being 18 years or older, hereby consent that the videotapes, photographs and/or motion picture film in which I appear, and/or audio recordings made of my voice may be used by the Florida Department of Environmental Protection, its assigns or successors, in whatever way they desire, including television, without compensation. Furthermore, I hereby consent that such photographs, films, negatives and recordings, and the plates and/or tapes from which they are made shall be the property of the Florida Department of Environmental Protection, its assigns or successors. They shall have the right to sell, duplicate, reproduce, and make other lawful uses of such photographs, films, recordings, plates and tapes as they may desire, free and clear of any claim whatever on my part, in perpetuity.

IN WITNESS WHEREOF I have hereunto set my this day of, 2		ate of Florida,
Location:		
Signature		
Name (Print)		
Address		
City	_State	Zip

Photo Release for Minors

I being Parent/Guardian of _______, hereby consent that the videotapes, photographs and/or motion picture film for which he/she posed, and/or audio recordings made of his/her voice may be used by the Florida Department of Environmental Protection, its assigns or successors, in whatever way they desire, including television without compensation. Furthermore, I hereby consent that such photographs, films, negatives, and recordings and the plates and/or tapes or other medium from which they are made shall be the property of the Florida Department of Environmental Protection, its assigns or successors, and they shall have the right to sell, duplicate, reproduce and make other uses of such photographs, films, recordings, plates, and tapes as they may desire free and clear of any claim whatsoever on my part or my child's part, or by anyone who may claim by or through my child, in perpetuity.

IN WITNESS WHEREOF I have hereunto set this day of, 2		State of Florida,
Signature of parent		
Name of child (print)		
Name of parent (print)		
Address		
City	State	Zip

Last modified April 30, 2011