

Judy D Photography

Photo Model Release Form

I, _____ (please print), grant permission to Judy D Photography to upload team and individual photographs taken of my child, _____, to a password protected client proofing gallery on the photographer's website, judydphotography.com, for the purpose of viewing by the Montford Basketball Players, parents and coaches. I understand that photographer will give the proofing gallery password only to the coaches, parents and players and that photographer has no control of who they share the password with.

I also grant Judy D Photography permission to post the team photo to the photographer's website, judydphotography.com, for the purpose of publication, promotion, illustration, or advertising, in any manner or any medium.

I acknowledge that I am the legal guardian of _____.

By signature below, I hereby agree to the above.

Printed Name: _____

Signature: _____ Date _____

Address: _____

Phone: _____ Email: _____

PLEASE RETURN SIGNED FORM TO COACH THOMPSON

Judy D Photography (850) 528-0239

Website: judydphotography.com Email: judy@judydphotography.com