

PHOTOGRAPH AND VIDEO RELEASE FORM

CLIENT INFORMATION

Name: _____ Date: _____

Phone: _____ Mail: _____

I would like your permission to use these photos for advertising. For example: Portfolios, online and print ads, etc. Your consent is necessary regarding this. Please circle and indicate with your signature if you would like your photos used or not used in advertising. We also like to tag our clients in photos used on our Instagram profile! Please indicate if you'd like to allow this or not below.

☐

Yes, feel free to use them

☐

Yes please tag me on Instagram

☐

No, please do not use them

☐

No, please do not tag me

Client Name (signature)

Date