

Photo, Video and Audio Release Form

I hereby grant _____ (“the Adult Family Home” or “AFH”) permission to use the likeness of

Name of Subject

as may be captured by digital or film photography, video tape, audio tape, or any other medium (“Recordings”). This right to use the Recordings shall be perpetual, non-exclusive, royalty free and shall continue in full force and effect until revoked in writing. This right to use the Recordings shall include, but not be limited to, publication of the Recordings on the internet by AFH, or on any web site maintained or used by AFH, or used in advertising, promotional or marketing materials by AFH. The subject waives any right or claim to royalties or compensation arising or related to the use of the Recordings.

The person signing this Release acknowledges that he or she has read this Release and understands its contents and meaning.

Dated: _____

Signature of subject (if applicable)

Authorization by person other than subject.

Signature

Typed or Printed Name

If the person granting this release is not the subject, please set forth the legal authority by which you are granting this release:

- _____ Power of Attorney
- _____ Guardian
- _____ Other (please explain)
