



# PHOTO CONTEST RELEASE FORM

Each photo submission must include a publicity release/permission to reprint photos. If submissions contain a recognizable person, then a signed model release must also be included. Please fill out one of these forms per individual photo submission and submit with the entry form.

## ENTRY INFORMATION

Photographer Name: \_\_\_\_\_ Email: \_\_\_\_\_

Photo Title: \_\_\_\_\_

## PUBLICITY RELEASE/PERMISSION TO REPRINT

By signing my name below, I acknowledge and grant Northwestern Illinois Area Agency on Aging (NIAAA) the right to use my photo entry for publishing, illustration, advertising, marketing, or for any other use in any medium for any purpose. I acknowledge that photo credit is not guaranteed for all uses of image. I hold Northwestern Illinois Area Agency on Aging harmless from any and all liability that might arise from foregoing use. My entry signifies that I will abide by all rules, including my true signature if my photo is selected, and acknowledgement of the terms and conditions given above.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*If photographer is under the age of 18, this form must be signed by a parent or legal guardian.*

Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## MODEL RELEASE

By signing my name below, I acknowledge and grant Northwestern Illinois Area Agency on Aging the right to use my likeness in a photograph in any and all of its publications, including website entries, without payment or other compensation. I understand and agree that these materials will become property of Northwestern Illinois Area Agency on Aging and will not be returned. I hereby irrevocably authorize Northwestern Illinois Area Agency on Aging to edit, alter, copy, exhibit, publish, and distribute this photo for a multitude of purposes including publicizing programs, or any other lawful purpose. Furthermore, I waive any right to royalties or other compensation arising or related to the use of the photograph. I hold Selby Gardens harmless and release and forever discharge any and all claims, demands, and causes of actions which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf of my estate have or may have by reason of this authorization.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*If photographer is under the age of 18, this form must be signed by a parent or legal guardian.*

Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

All accepted photos may be used in various media formats for an unlimited amount of time and at no cost to NIAAA or the photo contest sponsors. Photo credit is not guaranteed for all uses of images. Contest entrants agree to all the rules and regulations set for and by the decisions made by the judges. Judges' decisions are final.