

## **Consent to Photograph/Video**

## Photo/Video Release Authorization

I, the undersigned, give permission to the Leduc Art Club, and/or parties designated by the Leduc Art Club to photograph/video me and use such photograph(s)/video(s) in all forms of media, for any and all promotional purposes including advertising, display, audiovisual, exhibition or editorial use.

I further consent to the use of my name in connection with the photograph(s)/video(s) if needed by the Leduc Art Club and/or parties designated by the Leduc Art Club.

I understand and agree that I will not receive any payment for my time or expenses or any royalty for the publication of the photograph(s)/video(s) or the use of my name and I hereby release the Leduc Art Club, and/or any parties designated by the Leduc Art Club from any such claims.

I certify that I have read and fully understand this consent and release, and that all questions pertaining to this consent have been answered to my satisfaction.

Signature of Student or Parent/Guardian (for minors under the age of 18)	
Print Name	
Date	