

## **Adult Photo Release Form**

	Date(s):			
Photographer/Producer:				
Assignment: Location:				
	Activity:			
	ADULT PHOTO RELE	ASE FORM must be completed foother media.	r each adult who will be hig	şhlighted in a
	•	consideration, the receipt and su gree to the following:	fficiency of which are herel	oy acknowledged, I
	I hereby grant to Girl Scouts of New Mexico Trails ("GSNMT"), and others working for GSNMT or on it's behalf, and each of its respective licensees, successors, and assigns, the unlimited right and permission to use, distribute, publish, exhibit, digitize, broadcast, display, reproduce or otherwise exploit my name, picture, likeness and voice, or to refrain from so doing, in any manner or media whatsoever (whether now known or hereafter devised), anywhere in the world, by any persons or entities deemed appropriate by GSNMT, for any purpose including, without limitation, any use for educational, advertising, non-commercial or commercial purposes.			
clai blu rele GSI	ms based upon inv rring, illusionary eff ease and hold harm	approval, no claim to compensat asion of privacy, defamation or riect or use in any composite form less GSNMT, and any persons or for injury, compensation or negrase.	ght of publicity) arising out of my name, picture, likene entities acting on behalf of	of any use, alteration, ess and voice. I hereby or at the direction of
			Phone Number:	
Address:		City	& State:	Zip:
Sig	nature (REQUIRED):			Date:
*Email Address:				
*will not be used for any other purposes or distributed to third parties				
	Any revisions to the text	of this Release must be approved in writing effective. Please email completed form to		rder for the changes to be
DAT	E RECEIVED:	COUNCIL USE ONLY COUNCIL SIGNATURE: _		

REVISED 9/2024 **GSNMT FORMS**