**RELEASE AND AUTHORIZATION TO PHOTOGRAPH**

I, (name) grant to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name of photographer and company) ("Photographer"), consent to being the subject of Photographer's photographic likenesses or pictures.

I do not grant Photographer the right to use, reuse, publish, or republish the photographic likenesses or pictures of me, or those in which I may be included, in any printed, digital, Internet, or other media for exhibition, except that, Photographer may provide the photographic likenesses or pictures of me to the Senior Community Service Employment Program of [insert grantee name] and of the United States Department of Labor for the purpose of advertising in promotion of the Senior Community Service Employment Program.

I waive any right that I may have to inspect or approve the finished product or the advertising or other copy, or the use of the portraits or photographic likenesses of pictures of me.

I release the Senior Community Service Employment Program of [insert grantee name] and of the United States Department of Labor from any and all claims for damages or libel, slander, invasion of privacy, or any other claim arising out of the consent to take the photographic likenesses or pictures of me.

Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature

Witness: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Printed

Identifier (color of shirt, etc.):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ACKNOWLEDGMENT**

I have read this Release and Authorization and it was fully explained to me by a Senior Community Service Employment Program representative. Also, I understand that I have consented to taking photographs only for Senior Community Service Employment Program's use as described above.

Witness: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Parent or guardian must sign for a minor)