

I,	
do hereby give to Jonathan Route of J. Route Photography, his assigns, licensees, successors in interest, legal representatives, and heirs the irrevocable right to use my name (or any fictional name), picture, portrait, or photograph in all forms and in all media and in all manners, without any restriction as to changes or alterations (including but not limited to composite or distorted representations or derivative works made in any medium) for advertising, trade, promotion, exhibition, or any other lawful purposes, and I waive any right to inspect or approve the photograph(s) or finished version(s) incorporating the photograph(s), including written copy that may be created and appear in connection therewith.  I hereby release and agree to hold harmless the Photographer, his or her assigns, licensees, successors in interest, legal representatives and heirs from any liability by virtue of any blurring, distortion, alteration, optical illusion, or use in composite form whether intentional or otherwise, that may occur or be produced in the taking of the photographs, or in any processing tending toward the completion of the finished product, unless it can be shown that they and the publication thereof were maliciously caused, produced, and published solely for the purpose of subjecting me to conspicuous ridicule, scandal, reproach, scorn, and indignity. I agree that the Photographer owns the copyright in these photographs and I hereby waive any claims I may have based on any usage of the photographs or works derived therefrom, including but not limited to claims for either invasion of privacy or libel. I am of full age and competent to sign this release. I agree that this release shall be binding on me, my legal representatives, heirs, and assigns.  I have read this release and am fully familiar with its contents.	
Model (print):	Signed:
Address: Date:  Consent (if applicable) I am the parent or guardian of the minor name I approve the foregoing and waive any rights:	ed above and have the legal authority to execute the above release.
Witness:	Signed:
Parent or Guardian	<u> </u>
Address:, 20	
Date:, 20	

Email:\_\_\_\_\_\_\_, 20 \_\_\_\_