



## Sheltoewe Trace Outfitters

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## PHOTOGRAPHER RELEASE FORM

### Photographer Information

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

\_\_\_\_\_

For valuable consideration (detailed in Table A), hereby received, I irrevocably consent to and authorize the use and reproduction by Sheltoewe Trace Outfitters (hereafter referred to as STO), or anyone authorized by STO, of the photos described in Table B taken by me, negative or positive, mechanical or electronic, for any purpose whatsoever, without restriction, and without further compensation to me.

All negatives, positives, video or audiotapes, electronic files, together with any prints shall constitute STO property, solely and completely.

I hereby release, discharge and save harmless STO, their representatives, assigns, employees, or any person or corporation acting under the permission of STO including any firm publishing or distributing the finished product, even though the finished product may be distorted, blurred, altered or used in composite forms, in conjunction with factual or fictional text, either intentionally or otherwise. I hereby waive any right to approve the finished photograph, or any copy, which might be used in conjunction with the finished photograph.

If I am below the age of 18, the agreement has been signed or approved by the parent or guardian.

Photographer Signature \_\_\_\_\_

Date \_\_\_\_\_

I hereby certify that I am the parent or legal guardian of the above named photographer, and for value received I do give my consent without reservations to the forgoing on behalf of him, her, or them.

### Guardian Information

Name \_\_\_\_\_

Relationship to Model \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

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

Name: \_\_\_\_\_

Address: \_\_\_\_\_

**Table A - Valuable Consideration Received**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**Table B - Description of Photos**

Photo 1: \_\_\_\_\_

Photo 2: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

