



ATHENS SOIL AND WATER CONSERVATION DISTRICT

serving this area since 1946

69 S Plains Road
The Plains, Ohio 45780

Phone: (740) 797-9686 or (800) 582-8890
Fax: (740) 797-9079

Athens SWCD 2009 All Athens County Photo Contest

Photo Release Form: Photographer and subjects in photo

Photographers Name: (please print) _____

Address: _____

Email: _____ Phone Number: _____

Signed Photo/Media and Information Release of photos and subjects in photo

Immediately recognizable minors (under the age of 18) who appear in photographs must have a parent/legal guardian sign their release; immediately recognizable subjects 18 yrs and older can sign their own release form.

I hereby grant the Athens Soil and Water Conservation District (Athens SWCD) permission to use my likeness, name or images I have photographed in any/ all publications; including web site entries, without payment or any other consideration in perpetuity. I understand and agree that these materials will become the property of the Athens SWCD and will not be returned. My photos can also be used for my own personal or professional use.

I hereby irrevocably authorize Athens SWCD to edit, alter, copy, exhibit, publish or distribute this photo for purposes of publicizing SWCD programs or for any other lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photograph. I hereby hold harmless and release and forever discharge Athens SWCD from all claims, demands and causes of action which I, my heirs, representatives, executors, administrators, or any other person acting on my behalf or on the behalf of my estate have or may have reason of this authorization.

I am 18 years of age or older and am competent to contract in my own name. I have read this release before signing below and I fully understand the contents, meaning, and impact of this release. If under the age of 18, I will have consent signed by a parent or guardian.

Signature of photographer
Or signature of parent/legal guardian if a minor under age of 18

Date

Printed Name of parent/legal guardian if a minor under age of 18

Questions? Contact: Teresa Caldwell, Education Coordinator, 740-797-9686 ext 106 or teresa-caldwell@oh.nacdnet.org

Description of photo:

Please follow entry requirements for submission of photos for the Athens SWCD All Athens County Photo Contest

Submit:

1. jpeg or tiff file (300 dpi min) emailed to teresa-caldwell@oh.nacdnet.org or burned onto CD or 8x10 print and mailed to : Athens SWCD Photo Contest, 69 South Plains Road, The Plains, Ohio 45780
2. Entry form completed for each entry (original must be mailed)
3. Signed Athens SWCD Photo Release Form pages 1 and 2 (originals must be mailed)

Note: Completed forms and photos must be sent email or postmarked whatever is applicable by midnight July 24, 2009.

Subjects in photo release: By signing this release I have read and understand the Photo/Media and Information Release on page 1 of this document (The 2009 Athens SWCD All Athens County Photo Contest Photo Release Form)

Subject 1) Name of person in photo (please print) **Age (if minor)**

Address

City, State and Zip Code

Signature of person in Photo Date
Or signature of parent/legal guardian if a minor under age of 18

Printed name of parent/legal guardian if a minor under age of 18

Subject 2) Name of person in photo (please print) **Age (if minor)**

Address

City, State and Zip Code

Signature of person in Photo Date
Or signature of parent/legal guardian if a minor under age of 18

Printed name of parent/legal guardian if a minor under age of 18

Subject 3) Name of person in photo (please print) **Age (if minor)**

Address

City, State and Zip Code

Signature of person in Photo Date
Or signature of parent/legal guardian if a minor under age of 18

Printed name of parent/legal guardian if a minor under age of 18

Subject 4) Name of person in photo (please print) **Age (if minor)**

Address

City, State and Zip Code

Signature of person in Photo Date
Or signature of parent/legal guardian if a minor under age of 18

Printed name of parent/legal guardian if a minor under age of 18