

### JMRL RELEASE AND PERMISSION FORM

I hereby authorize library staff, or their designee, to interview, photograph or film me and/ or my child for use in library publications, programs, exhibitions, websites, showings or displays, and the promotion thereof in all media. The Library may edit such items as desired. I will not hold Jefferson-Madison Regional Library responsible for its use.

I hereby represent and certify that I have read the foregoing and fully understand the meaning and effect thereof and by my signature have given my consent for such use.

Please print names(s) here:

Adult:

Minor (under 18) children and ages:

Phone number:

Email address:

Description of clothing and appearance:

Event:  Date of photograph:

Library:  Department (Adult, YA, etc.)

Name of Staff Photographer:

Signature of Subject (or Parent of Minor Subject): \_\_\_\_\_