

WOMEN'S MINING COALITION
STANDARD PHOTO RELEASE FORM

Participant's Name: _____

I hereby authorize the Women's Mining Coalition (WMC) to publish photographs taken of me, and my name, for use in WMC's printed publications and website.

I acknowledge that since my participation in publications and websites produced by WMC is voluntary, I will receive no financial compensation.

I release WMC, its board members and its employees from liability for any claims by me or any third party in connection with my participation.

I understand that WMC is a non-profit organization and that use of photographs will be limited to educational, non-commercial purposes. I represent that I am over the age of eighteen and that I have read the foregoing and completely understand the contents thereof.

I have read and understand the above:

Signature _____

Printed name _____

Organization Name **Women's Mining Coalition**

Address _____

Date _____