



Permission for Photography/Film

I grant MyRight the right and unrestricted permission concerning any photographs/films that MyRight has taken or may take of me, to use and publish in any media (including internet and social media), and without restriction use my name in connection with any use.

I have read this document and fully understand its contents.

Name:

E-mail-address:

Location:

Date:

Signature:

IF THE MODEL IS UNDER 18 YEARS OF AGE, OR NOT CAPABLE OF CONTRACTING IN OWN NAME, A PARENT OR GUARDIAN MUST (ALSO) SIGN.

Parent/guardian signature: