

NICK C. CASALE – 2020 VISUAL STUDIOS / FIXFAST TECHNICIAN

Model, Individual, and / or Group Photography Release Form

Describe individuals covered by this release. Full name, Team Name, Group Name, Family Name, or the Event attendees are at.

Photography Shoot Description:
Date of Photography Shoot:
Address:
City / State:
Zip Code:

Permission and Rights Granted:

By signing this release, I hereby give the Photographer and Assigns my permission to use the Images and videos in any Media, for any purpose, which may include, among others, advertising, promotion, marketing and packaging for any product or service. I agree that the Images may be combined with other images, videos, text and graphics and cropped, altered or modified. I agree that I share full rights to the Images with the Photographer and / or Assigns.

I acknowledge and agree that this release is binding upon my heirs, assigns and any other person claiming an interest in the photography. I agree that this release is irrevocable and perpetual, and will be governed by the laws of the State of California.

I acknowledge that all individuals captured in this photography were notified about the photography event and have agreed to be part of it either verbally, in writing, or simply by attending the event in which they had foreknowledge that photography would be taken.

I represent and warrant that I am at least 18 years of age. I have the full legal capacity and right to execute this release and grant the rights herein granted, and to bind all persons claiming an interest in the photography.

Signature:
Date signed:
Contact Phone:
Contact Email:

Please fill out the Photography Release Form and send to: visualeyez@2020visual.com

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