



**PHOTO/MODEL RELEASE**

I, \_\_\_\_\_ (your name) hereby authorize the Creek Connections Action Group (CCAG) to use my name, and likeness (or excerpts there from), on film, tape, videos or as photographic images. I hereby waive the right to any and all payment or compensation for appearance in a videotape, film, brochure, Web page or newsprint and grant the right to make unlimited use of my image and/or voice in whatever production they desire for non-commercial purposes. I agree to hold the Creek Connections Action Group harmless from any liability arising from my performance or appearance.

***I certify that I am at least eighteen years of age.***

\_\_\_\_\_  
Spelling of Participant's Name                      Date                      Address                      Phone

\_\_\_\_\_  
Signature of Participant                      Address                      Location

**IF PARTICIPANT IS UNDER 18, THE PARENT (OR GUARDIAN, IF ANY) MUST SIGN.**  
**I am the parent or legal guardian of the above participant. I have read and agree to the provisions stated above.**

\_\_\_\_\_  
Signature of Parent or Legal Guardian                      Date                      Address                      Phone