
RELEASE FORM FOR MODELS

.....PLEASE PRINT FULL NAMES

I _____ am 18 Years of age or older.

I _____ am the parent or legal guardian of :

- _____
 - _____
 - _____
 - _____
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I understand and do hereby give, Artist Nada Meeks, licensees, and legal representatives the irrevocable right to use my name, my child(s) or ward(s) name (or any fictional name), picture, portrait, or photograph in all forms and media and in all manners, including composite or distorted representations, for advertising, trade, or any other lawful purposes, in perpetuity and I waive any right to inspect or approve the finished version(s), including written copy that may be created in connection therewith.

Sign _____ **Date** _____

Address: _____

City / Zip: _____

Email: _____

Phone: _____

nadameeks@gmail.com ▪ PO Box 96 . Live Oak FL 32064 ▪ (386)209-3866

EVENT TITLE: _____ **PHOTO NO.** _____
