

PHOTOGRAPHY *by* **JESSAMYN**

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Photo Release for a Minor

DATE: _____

I grant to Mssng Lnks, Inc., Photography by Jessamyn, and/or said agents or assigns of the aforementioned, the full rights to photograph my child, _____, and the use and reproduction of such photographs for the promotional purposes of Mssng Lnks, Inc. and/or Photography by Jessamyn.

This consent includes negatives, positives, or digital files for any purpose without any further compensation to me. All negatives, positives and digital files together with the prints shall constitute the property of the photographer, Jessamyn Mayher, solely and completely.

Child's Name: _____

Parent/Guardian Signature: _____

Print Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____