RELEASE FORM

I, the undersigned, for myself and my heirs, assigns and personal representatives, grant and assign to the United Way of York County, its agents, employees, designees, successors or assignees, all right, title and interest to photographic, video and/or audio reproductions of me. I also consent that such photographs, video and/or audio may be used in any manner said United Way sees fit for any type of advertising or publicity. I further grant permission for the copyright of such photographs, video and/or audio and consent that they may be reproduced either partially or in composite, in conjunction with other images, names and reproductions made through any media.

I have read the above statement and am familiar with its contents.

- I am 18 years of age or older
- Subject is under 18 years of age. I am the parent/legal guardian

  of ______________________________________ (child’s name)

__________________________________________
Your name (please print)

__________________________________________
Phone

__________________________________________
Witness

Q:\Forms\Photo Release