

# Image Release Form



The Sewing Labs™  
Create. Inspire. Thrive.

I hereby grant The Sewing Labs (TSL) the irrevocable right and permission to use photographs and/or video recordings of me on TSL and other websites and in publications, promotional flyers, educational materials, derivative works, or for any other similar purpose without compensation to me.

I understand and agree that such photographs and/or video recordings of me may be placed on the Internet. I also understand and agree that I may be identified by name and/or title in printed, Internet or broadcast information that might accompany the photographs and/or video recordings of me. I hereby authorize The Sewing Labs to edit, alter, copy, exhibit, publish, or distribute these photos for any lawful purpose. I waive the right to approve the final product. I agree that all such portraits, pictures, photographs, video and audio recordings, and any reproductions thereof, and all plates, negatives, recording tape and digital files are and shall remain the property of The Sewing Labs.

I hereby hold harmless, release, and forever discharge The Sewing Labs from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

**I HAVE READ AND UNDERSTAND THE ABOVE PHOTO RELEASE. I AFFIRM THAT I AM AT LEAST 18 YEARS OF AGE, OR, IF I AM UNDER 18 YEARS OF AGE, I HAVE OBTAINED THE REQUIRED CONSENT OF MY PARENTS/GUARDIANS AS EVIDENCED BY THEIR SIGNATURES BELOW.**

**THIS IS A RELEASE OF LEGAL RIGHTS. READ IT CAREFULLY AND BE CERTAIN YOU UNDERSTAND IT BEFORE SIGNING.**

\_\_\_\_\_  
Signature of Individual Photographed/Recorded

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Individual Photographed/Recorded

\_\_\_\_\_  
Date

**If the individual photographed/recorded is under eighteen (18) years old, the following section must be completed:**  
I have read and I understand this document. I understand and agree that it is binding on me, my child (named above), our heirs, assigns and personal representatives. I acknowledge that I am eighteen (18) years old or more and that I am the parent or guardian of the child named above.

\_\_\_\_\_  
Signature of Parent/Guardian of Individual Photographed/Recorded

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Parent/Guardian of Individual Photographed/Recorded

\_\_\_\_\_  
Date