The Camping and Caravanning Club

Adult Model Release Form

TO BE COMPLETED IN FULL BY PHOTOGRAPHER/VIDEOGRAPHER

Photography	Videography		Club	
Photographer's name	D*	The trie	ndly Club	
Shoot Location:		Shoot Date:		
Shoot & model descri	ption:			

MODEL'S PERMISSION AND RIGHTS GRANTED:

I hereby give the Photographer/ Videographer my permission to license the images and/or Video Footage and to use these in any Media for any purpose which may include, among others, advertising, promotion, marketing and packaging for any product or service. I agree that the images and/or Video Footage may be combined with other images, text and graphics, and cropped, altered or modified.

I agree that I have no rights to the images and /or Video Footage, and all rights to these belong to The Camping and Caravanning Club. I waiver all rights to claim any money for use of the images / Video Footage.

Model's signature:	Date:	
Model's printed name:		
Model's Name: Model's name maybe used within a caption that accompanies an image		
Full Address including postcode:		
Contact number:		
Email Address:		

Camping Caravanni