



# Westfield Area Y

2019-2020

## Standard Photo Release Form

In consideration of the good will, public service and community aid provided by the Westfield Area Y, which I support and from which I have received benefit, I hereby grant permission to the Y to use my name, to take and publish photographs or videotapes of me or which include my voice, in any media and promotional materials for legitimate purpose. I release all rights to such photographs, videotapes, and recordings. I acknowledge that you will be the sole owner of all rights arising out of their use for all purpose.

I understand that I shall receive no compensation from their use from any source whatsoever.

Signature (parent or guardian if under 18): \_\_\_\_\_

Date: \_\_\_\_\_