

MODEL RELEASE SHORT FORM

Name of Photographer	MODEL RELEASE	Date _____
Address, City, State, Zip and Telephone _____		
Location _____		
Description _____		
<p>For valuable consideration, I hereby give the above photographer permission to use my picture and I authorize the use and reproduction of it by you, or anyone authorized by you. This includes any and all photographs which you have this day taken of me, for any purpose whatsoever, without further compensation to me. All negatives and positives, together with the prints shall constitute your sole property.</p>		
I am over 18 years of age. Yes _____ No _____		
MODEL	_____	
	Signature of Model	
Address and telephone _____		

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