PHOTOGRAPHY AND VIDEO CONSENT, RELEASE AND WAIVER OF LIABILITY

I hereby give my consent to the Orion Township Public Library to photograph and/or videotape me and use the image(s) for informational, educational, promotional, or publicity purposes concerning the library and its services.

I understand that the image(s) may be used on the library’s website, or in official library publications or displays, public newspapers, magazines, reports, or other public documents; or electronic or digital videos and recordings. I also understand that the image(s) may be used without any further consent or authorization from me; the library may modify the photograph(s) in the process of editing, and I will not be entitled to any compensation for use of the image(s).

I also agree to release the Orion Township Public Library, its trustees, employees, or agents, from any and all liability arising out of or connected to the use of the image(s) as stated above.

I have read and understand the foregoing consent, release, and waiver of liability, and voluntarily accept and agree to its terms.

Name (print): _________________________________________________________________

Signature (if 18 years of age or older): __________________________________________

Date: __________________________________________

Name of Parent/Guardian, if under 18 years of age (print):

____________________________________________________________________________

Parent/Guardian Signature: ______________________________________________________

Date: ________________________________