

Photo/Video Release Form

	consent to the unrestricted use, by Six Nations of the Grand River
•	on (SNGRDC) it subsidiaries and those acting with its permission and authority,
• •	e photograph(s)/video images referred to below, in which I am included, in any
•	e world, without any restrictions whatsoever as to the nature of the use of
•	copy of any printed matter accompanying the photograph(s)/video images. I
	ges/footage may be altered and I waive the right to approve the finished
product. I understand th	at I do not own the copyright of the photograph(s).
I certify that I am o	ver 18 years of age and that I have the full legal right to execute this agreement.
I am not over 18 ye	ears old. A parent or guardian will sign on my behalf.
Description of Photo:	
Date Photo was taken:	
Signatures	
Name:	Date:
Signature:	
Age of model:	Name of Parent (if under age of 18):
Parent's Signature (if un	der 18):
Witness Signature:	Date:
Contact Information	
Address of Model:	
Telephone Number:	
E-mail Address:	