

Release Form



I, , hereby authorize the **City of Leduc** to use and reproduce any and all images of myself, and/or my child/children captured through video, photo, and/or digital camera, on at for the sole purposes of producing, publishing and printing City of Leduc promotional materials, print and web publications including the web sites of the City of Leduc and its associated departments and divisions.

It is understand that my signature releases any and all rights to these images and that I/we will not receive any financial remuneration or other form of compensation.

I also understand that I may not receive any prior notification from the City of Leduc that any of the captured images are being used or the format of that use.

All images electronic files, negatives and positives, together with the produced material, are owned by the City of Leduc.

In giving my consent, I hereby release and hold harmless the City of Leduc and their agents, employees, officials, representatives and contractors from any and all responsibility or liability for damage of any kind suffered in any manner whatsoever.

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Name: **Signature:**

Witness: **Signature:**

Name(s) of subject(s):

1 **2**

3 **4**

Contact Information:

Address:

City: **Phone:**

The personal information on this form is being collected for the purpose of producing, publishing and printing City of Leduc promotional material, print and web publications, under section 33(c) of the Authority of the Freedom of Information and Protection of Privacy Act. Should you have any questions regarding the information collected on this form, you may contact the City Clerk at City of Leduc, #1 Alexandra Park, Leduc, AB, T9E 4C4, ph: 780-980-7177.

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For office use:

Date: _____ Event: _____ Photographer: _____