



PHOTO CONSENT FORM

I hereby give permission to	, its officers,
agents, legal representatives and assigns and the	
, to take pho	otographs, videos, or voice
recordings of me at work and company function	s and use them for various
purposes in publications, including electronic pu	blications, social media,
presentations, promotional literature, advertising	g, community presentations,
marketing, business development, education, an	d/or other similar ways.
I understand and agree that I: (1) will not be paid	for these photographs
and/or sound or video footage, and (2) have no	rights to them whatsoever.
I understand I have no right to inspect or approv	
video/recording, nor do I have any right to inspe	
copy or printed matter utilizing my image or voi	ce. Further, I hereby waive
any and all such potential rights if applicable.	
I hereby release	from any and all claims
and/or liabilities resulting from the taking, use or	r distribution of these
photographs, videos or voice recordings.	
Date	
Employee Name	
Employee Signature	

JacksonLewis

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