



**ARTS IN ACTION**  
CONSULTING FIRM

**MODEL/PHOTO/IMAGE RELEASE**

In exchange for consideration received, I hereby give permission to: **ARTS IN ACTION CONSULTING LLC** to use my name and photographic likeness in all forms and media for advertising, trade, and any other lawful purposes.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Email address: \_\_\_\_\_

Witness to the above signature: \_\_\_\_\_

Witness Email Contact: \_\_\_\_\_

If Model is under 18:

I, \_\_\_\_\_, am the parent/legal guardian of the individual named above, I have read this release and approve of its terms.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Witness to the above signature: \_\_\_\_\_

Witness Email Contact: \_\_\_\_\_