

Southern Tier Library System and Member Libraries Photography Release Form

Southern Tier Library System and its Member Libraries (“Libraries”) occasionally use photographs of patrons and events in publications, advertising, press releases and on the Internet, including but not limited to, its website and social media pages. Please sign this Release to grant the Libraries permission to use your and/or your child’s image.

I hereby grant permission to the Libraries to use my image on the Internet, including but not limited to, its website, social media pages, advertising, press releases or in other publications without further consideration, and I acknowledge the Libraries’ right to crop or treat the photographs at its discretion. I also acknowledge that the Library may choose not to use my photograph at this time, but may do so at its own discretion at a later date.

I also understand that once my image is posted on the Internet, the image can be downloaded. By signing this Release, I acknowledge that I hereby release and forever discharge the Libraries’ and the trustees, officers, agents, and employees of the Libraries from and against any and all claims, damages or suits which may arise from the use of photographs by the Libraries in publications, press releases, advertising or on the Internet, including but not limited to, its website. I acknowledge that the Libraries need not receive any further permission, approval, or authorization from me in order to use my image.

The Libraries reserve the right to discontinue use of any photograph without notice. By signing this Release, I represent that I am eighteen years of age or older and have voluntarily chosen to grant these rights to the Libraries. The rights and obligations under this Release shall be binding upon my heirs and successors in interest. I may terminate this Release by providing written notice to the Libraries of such termination. The Libraries may continue to use any materials prepared or photographs taken before receipt of my termination.

NAME: _____
DATE: _____
ADDRESS: _____
PHONE: _____
E-MAIL: _____
SIGNATURE: _____

For persons under the age of 18, the permission of a parent or guardian is required on this Photography Release Form. I hereby grant permission to the Libraries to use the photograph of my child as outlined above.

NAME OF CHILD UNDER 18: Circle One

- Permission given to identify by first and last name
- Please identify by first name only
- Please do not identify by name

Date:

Signature of parent or guardian:

PATRON'S NAME _____ DATE: _____