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www.loxahatcheeriver.org

**PHOTOGRAPH RELEASE FORM** - By signing the photographic release below, you are agreeing to allow photographs of yourself, and minors accompanying you, to be used by the Friends of the Loxahatchee River (Friends), the Loxahatchee River District (LRD), and the River Center. **If your picture has been taken in reference to a particular program, your name will be used in connection with the photograph(s) and may be associated with your name/your company's name/your organization's name.**

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**EVENT NAME:** \_\_\_\_\_ **EVENT DATE:** \_\_\_\_\_

I grant permission for my child to appear in photographs or videotapes while participating in the Society of Women Engineers (SWE) Girl Scout Workshop activities that may be published by the Society of Women Engineers and/or the River Center in video form, hard copy publications and/or on a SWE and/or the River Center Website or other publications promoting SWE and/or the River Center programs.

I GIVE MY PERMISSION, without restriction, for consideration received, for the above mentioned agencies (Friends, LRD, River Center, SWE) to take, reproduce and publish, in all media including electronic formats known or unknown, photographs of me, or to have this done on its behalf. I understand that these photographs may be used, in whole or in part, in informational, educational or commercial publications of any kind (including without limitation, electronic publishing), by the Friends of the Loxahatchee River and its agents.

I UNDERSTAND AND AGREE THAT:

1. I will not have any right to inspect the finished work or product or to approve its use.
2. Ownership of the originals and all copies belongs to Friends and its agents. This includes all rights to use, not use, or dispose of the photographs, in any manner whatsoever.
3. The agreements in this Release are legally binding and cannot be changed by me or someone who has been given my rights.

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**FOR ADULTS:** \_\_\_\_\_ **Date Signed:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**FOR MINORS:**

**Child's Printed Name:** \_\_\_\_\_ **Troop #:** \_\_\_\_\_

**Parent/Guardian Printed Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Name of Person Who Obtained Release:**

**Printed Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**Title:** \_\_\_\_\_ **Date:** \_\_\_\_\_