

Ophelia's Place

a community for girls

1577 Pearl Street Suite 100
Eugene, Oregon 97401
541-284-4333

Girl's printed name _____

Photo/Video Release Form

I, _____, grant to Ophelia's Place and its representatives, employees and authorized media affiliates the right to take photographs and video footage of me or my child in connection with my participation in Ophelia's Place activities. I authorize Ophelia's Place, its assigns and transferees to copyright, use and publish the same in print and/or electronically.

I agree that Ophelia's Place may use such photographs and video footage of me or my child with or without a name for any lawful purpose, including for example such purposes as publicity, illustration, advertising, Web content and journalistic reporting for such outlets as television, magazines or newspapers. I acknowledge that since my participation in media produced by these entities is voluntary, I will receive no financial compensation. I further agree that my participation in any media produced by these entities confers upon me no rights of ownership.

I have read and understand the above:

Guardian printed name _____

Guardian signature _____

Date _____