



DUPONT POLICE DEPARTMENT PHOTO RELEASE OF LIABILITY FORM

I hereby grant the **DUPONT POLICE DEPARTMENT** permission to use my likeness and/or my child(ren's) likeness in a photograph, video, or other digital media ("photo") in any and all of its publications, including web-based publications (Facebook), without payment or other consideration.

I understand and agree that all photos will become the property of the **DUPONT POLICE DEPARTMENT** and will not be returned.

I hereby irrevocably authorize the **DUPONT POLICE DEPARTMENT** to edit, alter, copy, exhibit, publish, or distribute these photos for any lawful purpose. In addition, I waive any right to inspect or approve the finished product wherein my likeness and/or my child(ren's) likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photo.

I hereby hold harmless, release, and forever discharge the **DUPONT POLICE DEPARTMENT** from all claims, demands, and causes of action of which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

I HAVE READ AND UNDERSTAND THE ABOVE PHOTO RELEASE. I AFFIRM THAT I AM AT LEAST 18 YEARS OF AGE, OR, IF I AM UNDER 18 YEARS OF AGE, I HAVE OBTAINED THE REQUIRED CONSENT OF MY PARENTS/GUARDIANS AS EVIDENCED BY THEIR SIGNATURES BELOW. I ACCEPT:

Name of the Person(s) in the Photo: _____

Signature of Person in the Photo(s): _____ Date: _____

Signature of Person in the Photo(s): _____ Date: _____

Signature of Person in the Photo(s): _____ Date: _____

If under 18, a parent or guardian must sign.

Parent/Guardian Signature: _____ Date: _____