

PHOTO RELEASE FORM

I, with a mailing address of	
City of	, State of
Country of	(the
"Releaser") grant permission and consent to Devil's Hour Production	s & Matthew Joseph
Benton (the "Releasee") for the use of the following photograph(s) as	identified below
for presentation under any legal condition, including but not limited to	o: publicity,
copyright purposes, illustration, advertising, and web content:	
Describe Photo(s)	
Payment (check one)	
\Box - I understand that there shall be no payment for this release.	
\square - I understand that there shall be a payment for this release in the a	mount of
\$	
Royalties (check one)	
\Box - I understand that there shall be royalties for the photographs used	l in the amount of

\Box - I understand that no royalty, fee,	or other co	ompensation shall become	e payable to me
by reason of such use. Revocation (ch	eck one) I	Page 2 of 2 \square - I understa	and that with my
authorization below the photograph(s)) may neve	er be revoked. 🗆 - I unde	rstand that I may
revoke this authorization at any time b	oy notifyin	g the Releasee in writing	. The revocation
will not affect any actions taken befor	e the recei	pt of this written notificat	tion. Images will
be stored in a secure location and only	y authorize	ed staff will have access to	o them. They
will be kept as long as they are relevan	nt and afte	er that time destroyed or a	rchived. We, the
Releasor and Releasee, have understoon	od and agi	ee to the aforementioned	terms and
conditions.			
Releasor's Signature			
Print Name	Date		
Releasee's Signature			
Print Name	Date		