



## Permission to Use Photographs

First and last name of photo subject \_\_\_\_\_  
(Please print)

First and last name of parent/guardian \_\_\_\_\_  
(If photo subject is under age 18)

Description of photo(s) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Name of organization connected with photos/subjects (if applicable) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

I authorize the Community Foundation of Northern Colorado, its employees, and its representatives the right to use, publish, and copyright the photo(s) described above in print and/or electronically. I agree that the Community Foundation of Northern Colorado may use the photo(s) with or without my name for any lawful purpose, including as publicity, illustration, advertising, social media and web content.

Signature of photo subject \_\_\_\_\_ Date \_\_\_\_\_

Signature of parent or guardian \_\_\_\_\_  
(If photo subject is under age 18)