

PHOTO RELEASE FORM

I, (the “Releasor”) grant permission and consent to Successful Black Parenting/Successful Parenting Media (the “Releasee”) for the use of the following photograph(s) as identified below for presentation under any legal condition, including but not limited to: publicity, () illustration, advertising, and web content:

Description: Maternity Photos

Payment

I understand that there shall be no payment for this release.

Royalties

I understand that no royalty, fee, or other compensation shall become payable to me by reason of such use.

Revocation

I understand that with my authorization below the photograph(s) may never be revoked.

We, the Releasor and Releasee, understand and agree to the aforementioned terms and conditions.

Releasor’s Signature: _____ Date _____

Releasee’s Signature: _____ Date _____
Successful Black Parenting/Successful Parenting Media