

Permission to Use Photographs

Event Name: _____

Location/Date: _____

Notes: _____

I grant to Blue Ridge Discovery Center, Inc., the right to take photographs of me and my family in connection with the above-identified event, or in connection with other events authorized by Blue Ridge Discovery Center, Inc.. I authorize Blue Ridge Discovery Center, Inc., its assignees and transferees to copyright, use and publish the same in print and/or electronically.

I agree that Blue Ridge Discovery Center, Inc. may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

I have read and understand the above:

Signature _____

Printed name _____

Address _____

Date _____

Signature, parent or guardian (if under age 18) _____