# FLORIDA MASONRY, INC. PHOTO RELEASE FORM

Photographer's Name: _____ Phone: _____

Photographer's Company: _____ Email: _____

Photographer's Address: _____

City, State, ZIP Code: _____

Subject: Photo Release Authorization

I, _____ , hereby grant permission to Florida Masonry, Inc. and _____ to use, reproduce, and distribute the photographs (attach list of images if applicable) taken of the _____ [Project Name] in any medium, including but not limited to print publications, online publications, presentations, websites, and social media without any restriction as to the number of copies or the period for which such use shall continue.

I understand and agree that these photographs may be used by Florida Masonry, Inc. and _____[Contractor] for various purposes, including advertising, marketing, and promotion of their annual Masonry Excellence Awards Program. I acknowledge that I will not receive any compensation, monetary or otherwise, for the use of these photographs.

I further release the Florida Masonry, Inc. and _____[Contractor] from any liability or claims related to the use of the photographs.

I am the legal owner of the rights to my image and have the authority to grant this release. I acknowledge that I am of legal age and have read and understood the terms of this release before signing it.

Signature: _____

Printed Name: _____

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