



Photo Release Form

By signing this release form, I authorize Blue Federal Credit Union, to use the following personal information:

(1) My picture – including photographic, motion picture, and electronic (video) images. (2) My voice – including sound and video recordings.

I hereby grant to Blue Federal Credit Union, its subsidiaries, licensees, successors, and assigns, the right to use, publish, and reproduce, for all purposes, my name, pictures of me in film or electronic (video) form, sound and video recordings of my voice, and printed and electronic copy of the information described in sections (1) and (2) above in any and all media including, without limitation, cable and broadcast television and the Internet, and for exhibition, distribution, promotion, advertising, sale, press conferences, meetings, hearings, educational conferences and in brochures and other print media. This permission extends to all languages, media, formats and markets now known or hereafter devised. This permission shall continue forever unless I revoke the permission in writing.

I also waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photograph.

I hereby hold harmless and release and forever discharge Blue Federal Credit Union from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization. I understand and agree that these materials will become the property of the Blue Federal Credit Union and will not be returned.

I am 18 years of age or older and I am competent to contract in my own name. I have read this release before signing below, and I fully understand the contents, meaning, and impact of this release.

I understand that I am free to address any specific questions regarding this release by submitting those questions in writing prior to signing, and I agree that my failure to do so will be interpreted as a free and knowledgeable acceptance of the terms of this release.

PRINTED NAME _____ DATE _____
SIGNATURE _____ DATE _____

If the person signing is under the age of 18, there must be consent by a parent or guardian, as follows: I hereby certify that I am the parent or guardian of _____, named above, and do hereby give my consent without reservation to the foregoing on behalf of this person.

PARENT/GUARDIAN SIGNATURE _____ DATE _____
PARENT/GUARDIAN PRINTED NAME _____ DATE _____