



*P.O. Box 489  
Sullivan, MO 63080*

## Photo Release Form

I hereby grant the Sullivan Bank permission to use photographs taken of me for publication, as well as my name and likeness in connection with these photographs, for use in any electronic or printed communications and for any advertising, promotion, or publication, including the Sullivan Bank's website.

I hereby waive any right to inspect or approve the finished photographs or printed or electronic matter that may be used in conjunction with them now or in the future, whether that use is known to me or unknown. Additionally, I waive any right to royalties or other compensation arising from or related to the use of the photograph.

I hereby release and discharge forever the Sullivan Bank, its employees, agents, assigns, and any designee from any and all claims and demands arising out of or in connection with the use of such photographs, including but not limited to any claims for defamation or invasion of privacy.

I am of legal age (18 years or older), and have read the foregoing and fully understand the contents thereof.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**\*\*If the person signing is under age 18, there must be consent by a parent or legal 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's Printed Name \_\_\_\_\_

Parent/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_