

# Photo Release Waiver

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I understand that the Photographer may use such photographs with or without associating names thereto and permit the use of any printed material in connection therewith.

I further waive any claim for compensation of any kind for the Photographer's use or publication of photographs of me and/or those of my minor children (if applicable).

I hereby consent that the Photographer has full rights to transfer, license, sell, lease, or otherwise confer either permanently or temporarily any reproduction rights to any Images to any third party.

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I understand that this release waiver does not give me rights to the images.

I understand that I do not have rights to transfer, sell, lease, or otherwise confer either permanently or temporarily any reproduction rights of any images to any third party.



By checking the box, I acknowledge and represent that I am over the age of 18, have read this entire document, that I understand and agree to its terms and provisions, and that I have checked this knowingly and voluntarily on behalf of myself and/or my minor children.

.....  
Parent/Guardian Printed Name\*

.....  
Minor Printed Name

.....  
Signature

.....  
Signature of Parent

Date .....

NOTE: Please print sign and scan and to email [kwayaaustraliainc@outlook.com](mailto:kwayaaustraliainc@outlook.com)