

**“A Life Above” Photo Contest  
PHOTO RELEASE**

I, \_\_\_\_\_, hereby as legal guardian give my consent  
to \_\_\_\_\_ to photograph, film, videotape and then use,  
reproduce, and publish the following images of me and/or my child/children,

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If you are not the legal guardian, who may be contacted to grant permission to use the image?

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**Description of Image (date, location, and any other pertinent information)**

**Permission Granted**

This release is required for the image described above to be included as a submission to the 2015 “A Life Above” photography contest by the City of Vestavia Hills. As a submission to the contest, this image may be used by the City of Vestavia Hills for publication, promotion, any form of advertising, or in its education programs. The contestant retains full ownership for any other use.

Additionally, these photographs may be used in any manner the aforementioned photographer sees fit, with or without identification of the subjects.

**Signature(s)**

I have read and understood the above.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Date: \_\_\_\_\_

Any questions or concerns related to this form may be directed to the City of Vestavia Hills at (205) 978-0100 or [administration@vhal.org](mailto:administration@vhal.org).