

Rev. 8-26-16

Virginia Tourism Authority

d/b/a Virginia Tourism Corporation

One James Center, 901 East Cary Street, Ste. 900, Richmond, Virginia 23219

Tel: 804-545-5500 Fax: 804-545-5501 www.VATC.org

**PHOTO AND VIDEO
RELEASE AND CONSENT FORM**

For good and valuable consideration received, the sufficiency of which is herein acknowledged, and by signing this release, I hereby authorize Virginia Tourism Authority, d/b/a Virginia Tourism Corporation (VTC) a public body corporate and political subdivision of the Commonwealth of Virginia, its legal representatives, and its successors and/or assigns, to use my photograph(s) and/or video image(s) (the "Content") in perpetuity to advertise, publicize and/or promote Virginia without further consent by myself or other persons, and for no further right to additional consideration or accounting. Permission is also granted for the use of my image on a non-exclusive basis throughout the world on all forms of media and the internet by VTC, its legal representatives, and its successors and/or assigns, VTC identified industry partners, and affiliated Commonwealth of Virginia agencies and political subdivisions, or any other entity VTC deems appropriate.

I hereby waive any right to the Content and further waive any right that I may have to inspect or approve the finished product(s) and the advertising, publicity or promotional copy that may be used in connection therewith or the use of which it may be applied.

I hereby warrant that I am of the age of majority and have the full legal capacity and right to contract in my own name. I have read the above authorization, release, and agreement, prior to its execution, and I am fully familiar with the contents thereof. This release shall be binding upon me and my heirs, legal representatives, successors and/or assigns. I agree that this release is irrevocable, worldwide, and perpetual, and will be governed by the laws of the Commonwealth of Virginia.

Describe the Photograph(s) and/or Video(s) including the location and date:

Signature: _____ Date: _____
 Print Name: _____ Age: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Telephone: _____ Email: _____

If model is underage (under 18):

I, the parent or legal guardian of the model, have read the above authorization, release and agreement and I am fully familiar with the contents thereof. I give my consent and agree to the uses as stated above.

Signature: _____

Print Name: _____

