

159 Sapsucker Woods Road ♦ Ithaca, New York 14850 ♦ 800-843-BIRD ♦ www.birds.cornell.edu



159 Sapsucker Woods Road ♦ Ithaca, New York 14850 ♦ 800-843-BIRD ♦ www.birds.cornell.edu

MODEL AGREEMENT AND RELEASE

By signing this Model Agreement and Release Form, I or my parent/guardian agree to the following:

- The Cornell Lab of Ornithology may use my name and image for use in commercial and non-commercial products and projects of the Lab, or promotion of its projects or products, via print, web, broadcast or other media, in perpetuity.
- The image remains the property of Cornell Lab of Ornithology.
- Only my first name will be used if I am under age 18.
- I understand that I am not being compensated in any way for the use of my image and do not have approval over the final product in which it appears.
- I hereby release Cornell University, and all persons acting under its permission or authority from any and all claims or liability arising out of use of my name and image. This release shall bind my heirs, guardians, assigns, and legal representatives. I am over the age of eighteen, and have read the above release, and fully understand its contents.

If the person named below is under age 18, his or her parent or guardian must sign this form.

Release to be filled out, signed and dated at the time of the photography session.

Release form will be kept on file indefinitely.

MODEL AGREEMENT AND RELEASE

By signing this Model Agreement and Release Form, I or my parent/guardian agree to the following:

- The Cornell Lab of Ornithology may use my name and image for use in commercial and non-commercial products and projects of the Lab, or promotion of its projects or products, via print, web, broadcast or other media, in perpetuity.
- The image remains the property of Cornell Lab of Ornithology.
- Only my first name will be used if I am under age 18.

Description of image or photo shoot:

- I understand that I am not being compensated in any way for the use of my image and do not have approval over the final product in which it appears.
- I hereby release Cornell University, and all persons acting under its permission or authority from any and all claims or liability arising out of use of my name and image. This release shall bind my heirs, guardians, assigns, and legal representatives. I am over the age of eighteen, and have read the above release, and fully understand its contents.

If the person named below is under age 18, his or her parent or guardian must sign this form.

Name(s) (please print)
Address
Telephone Email
Signature
Signature of parent or guardian (if under 18)
Date

Release to be filled out, signed and dated at the time of the photography session.

Release form will be kept on file indefinitely.