

AMC PHOTO RELEASE

Date: _____ Leader: _____ Chapter: _____ Activity: _____

This form is for participants to indicate whether or not they will allow the Appalachian Mountain Club (AMC) to use photos taken on this activity. While we very much appreciate participants signing this release, doing so is not required in order to participate.

I hereby authorize the Appalachian Mountain Club (AMC) and/or parties designated by the AMC (including periodicals, other printed matter, or electronic media, and their editors) to use my photograph for sale to or reproduction in any medium the AMC or its designees see fit for the purposes of advertising, display, exhibition, or editorial use.

<input type="checkbox"/> I agree			
<input type="checkbox"/> I do not agree	Printed Name	Signature	Date

<input type="checkbox"/> I agree			
<input type="checkbox"/> I do not agree	Printed Name	Signature	Date

<input type="checkbox"/> I agree			
<input type="checkbox"/> I do not agree	Printed Name	Signature	Date

<input type="checkbox"/> I agree			
<input type="checkbox"/> I do not agree	Printed Name	Signature	Date

<input type="checkbox"/> I agree			
<input type="checkbox"/> I do not agree	Printed Name	Signature	Date

<input type="checkbox"/> I agree			
<input type="checkbox"/> I do not agree	Printed Name	Signature	Date

<input type="checkbox"/> I agree			
<input type="checkbox"/> I do not agree	Printed Name	Signature	Date

<input type="checkbox"/> I agree			
<input type="checkbox"/> I do not agree	Printed Name	Signature	Date

<input type="checkbox"/> I agree			
<input type="checkbox"/> I do not agree	Printed Name	Signature	Date