



MODEL RELEASE FORM

This agreement is an agreement between you, the model/s, and Sarah Ellen Barnes trading as Sarah Ellen Photography.

PHOTOGRAPHER

Name: Sarah Ellen Barnes - trading as Sarah Ellen Photography

Address: PO Box 352, Byford, WA 6122

Contact: hello@sarahellen.net

MODEL

Name: _____

(full name, including any minors who may be present in photographs)

Address: _____

Contact number: _____

SHOOT DETAILS

Date photographs were taken: _____

Location: _____

Client/Campaign: _____

In exchange for receiving _____ I, the model, grant you, the photographer and client, usage of the photographs subject to the following conditions:

- I understand that the photographs taken of me during this session can be used in any publication (commercial or otherwise), portfolio, public display, online platform, social media and for advertising purposes.
- Any special conditions on usage agreed between the model and photographer:



I acknowledge that by signing this form, subject to the usage restrictions above, I give up all claim of ownership of the photographs, and assign copyright to the photographer and client named above. No further payment will be due. Use of the photographs may be granted to third parties, however the photographs will remain the property of the photographer and client.

I have read this form carefully and fully understand the terms agreed upon.

Full Name

Signature

Date

If the model is **under the age of 18**, a parent or legal guardian must sign:

Parent/Guardian

Date

Address

Phone
