

COBB COUNTY COMMUNICATIONS OFFICE

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Model Release

In exchange for consideration received, I hereby give permission to Cobb County Government to use my name and photographic likeness in all forms and media (including social media or electronic media) for advertising, trade, and any other lawful purposes.

<u>Print Model Name</u> (If the model is under 18, a parent/legal guardian should print child's name and age):
Signature (If model is under 18: Parents/legal guardian: fill out the sections below):
<u>Date;</u>
If Model is under 18: I, (parent's/legal guardian's name printed here), am the parent/legal guardian of the individual named above, I have read this release and approvof its terms.
Signature (parent's/legal guardian's name signed here):
E-mail or phone number:
*Note to photographer: Provide a brief description of your subject for later identification.

^{*}Please fill out the form in its entirety.