



Township of Pequannock

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Tel: (973) 835-5700
Fax: (973) 835-1152

PHOTOGRAPHY CONSENT FORM/RELEASE

I, (print name) _____, hereby grant permission to the Township of Pequannock to take and use: photographs and/or digital images of me for use in news releases, website, newsletters, and seasonal brochures. I further agree that my name and identity may be revealed in descriptive text or commentary in connection with the image(s). I authorize the use of these images without compensation to me. All negatives, prints, digital reproduction shall be the property of the Township of Pequannock.

(Date)

(Signature of adult subject)

(Address)

(City, State, Zip)

RELEASE FOR MINOR CHILDREN

I, (print name) _____, parent of official guardian of (child's name) _____ hereby grant permission to the Township of Pequannock to take and use: photographs and /or digital images of my child for use in news releases, website, newsletters, and seasonal brochures. I agree that my child's name and identity may be revealed in descriptive text or commentary in connection with the image(s). I authorize the use of these images without compensation to me. All negatives, prints, digital reproductions shall be the property of the Township of Pequannock Township.

(Date)

(Signature of Parent or Guardian)

(Address)

(City, State, Zip)