



LOWER MAKEFIELD TOWNSHIP Parks & Recreation



Parks and Recreation, Image, and Voice Release

PHOTO/IMAGE/VOICE/PRESS RELEASE I hereby give Township entities, and any and all of its representatives from their assigns, licenses, and legal representatives, the irrevocable right to use my name (or any fictional name), picture, portrait, photograph, image, or voice in all forms and media and in all manners, including composite or purpose, and I waive my right to inspect or approve the finished product, including written copy, that may be created in connection therewith. I also agree that this releases Township entities including, but not limited to, its Board of Supervisors, officials, and employees, and any and all of its representatives from any and all monetary obligations or payments to me or any or all of my authorized representatives for use of video, films, photographs, image and/or voice of myself or, as applicable, my child. I am of full legal age or have parental consent. I have read this release and am fully familiar with its contents.

Sign: _____

Name/Please Print Date _____

Address _____

Signature (or parent's signature if under 18 years of age) I am the parent or legal guardian of the minor named above and have legal authority to execute the above release. I approve the foregoing and waive any rights in the premises.

Name/Please Print Date _____

Address _____

For More Information Contact: Monica Tierney MBA, M.Ed.
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