



Lake County's Community Foundation

## Photo Release Form

Legacy Foundation Inc.  
1000 E 80<sup>th</sup> Pl, Ste 402N  
Merrillville, IN 46410

Permission to Use Photograph

Subject: Teen Action Group

Location: Lake County, Indiana

I grant to Legacy Foundation, its representatives and employees the right to take photographs of me and my property in connection with the above-identified subject. I authorize Legacy Foundation to copyright, use and publish the same in print and/or electronically.

I agree that Legacy Foundation may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

I have read and understand the above:

Signature \_\_\_\_\_

Printed name \_\_\_\_\_

Organization Name (if applicable) \_\_\_\_\_

Address \_\_\_\_\_

Date \_\_\_\_\_

Signature, parent or guardian \_\_\_\_\_  
(if under age 18)