

Universal Adult Model Release for all Agencies

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I hereby affirm that I am over the age of majority and have the right to contract in my own name. I have read the above authorization, release and agreement, prior to its execution; I fully understand the contents thereof. This agreement shall be binding upon me and my heirs, legal representatives and assigns.

Shoot Date: _____ Place: _____

Photographer:

Name Print: Marcin Ciesielski

Phone: _____

Address: _____

Zip: _____

City: _____

Country: _____

Email: _____

Date: _____ Signature: _____

Description:

Model:

(please legibly print everything except signature)

Name Print: _____

Date of Birth: _____

Phone: _____

Address: _____

Zip: _____

City: _____

Country: _____

Email: _____

Date: _____ Signature: _____

Witness:

(please legibly print everything except signature)

Name Print: _____

Phone: _____

Address: _____

Zip: _____

City: _____

Country: _____

Email: _____

Date: _____ Signature: _____