



PHOTO RELEASE FORM

2509 North Front Street • Harrisburg, PA 17110
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Permission to Use Photograph

Subject: _____

Location: _____

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

I agree that PBA 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)

NOTE: It is incumbent upon the school to obtain and retain all student permission forms for photo release. PBA does not retain these records. When a school emails student photos to PBA, it is understood that the school has the permission to do so from the student/parent, and has on file the signed permission slip. All photos sent to PBA may be posted on our website or used in other PBA promotional materials.

