

**BCCLS PASSPORT WEEK Photo Release Form**

Bergen County Cooperative Library System (BCCLS)  
810 Main Street  
Hackensack, NJ 07601

Library:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Permission to Use Photograph

Event: BCCLS PASSPORT WEEK – September 8 – September 15

Location: \_\_\_\_\_

I grant to BCCLS / \_\_\_\_\_, the right to take photographs of me and my family in connection with the above-identified event. I authorize BCCLS / \_\_\_\_\_, its assigns and transferees to copyright, use and publish the same in print and/or electronically.

I agree that BCCLS / \_\_\_\_\_, 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 \_\_\_\_\_

Address \_\_\_\_\_

Date \_\_\_\_\_

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