City of Bellevue

PHOTO/VIDEO RELEASE

I, the undersigned participant and/or parent or guardian of the minor participant(s), give my permission to have video and/or photos taken and to have quotes by me or the minor participant(s) reproduced by the City of Bellevue. I also give permission for the video and/or photograph(s) to appear on City of Bellevue websites, television stations and/or print publications. Neither I nor the minor participant(s) will receive compensation of any kind for appearing in such photos and/or videos.

There is no guarantee that shots of me and/or the minor participant(s) will be used. No part of the video(s) and/or photo(s) is to be sold to any outside parties, but the video(s) may air on local or national television stations. Any photos, videos or quotes are subject to release to the public pursuant to public disclosure laws.

Date: _____

_____

(*printed name of participant)*

_____

(*if participant is a minor, printed name of guardian)*

_____

(*Signature of adult participant or parent and/or legal guardian of minor participant*)