

Jonathan W. Souer

(612) 379-1941 – Cell: (952) 201-7250 – jon@jonsouer.com

Property Release

For valuable consideration herein acknowledged as received, the undersigned being the legal owner of, or having the right to permit the taking and use of photographs of certain property designated as:

does grant to Jonathan W. Souer, hereafter known as the Photographer / Filmmaker, his agents or assigns, the full rights to use such photographs and copyright same, in advertising, trade, or for any purpose.

- a) I also permit the use of any printed material in connection therewith.
- b) I hereby relinquish any right that I may have to examine or approve the completed product or products or the advertising copy or printed material that may be used in conjunction therewith or the use to which it may be applied.
- c) I hereby release, discharge and agree to save harmless the Photographer / Filmmaker, his heirs, legal representatives or assigns, and all persons functioning under his permission or authority, or those for whom he is functioning, from any liability by virtue of any blurring, distortion, alteration, optical illusion, or use in composite form whether intentional or otherwise, that may occur or be created in the taking of said picture or in any subsequent processing thereof, as well as any publication thereof, including without limitation any claims for libel or invasion of privacy.
- d) I agree that I have no rights to the images, and all rights to the images belong to the Photographer / Filmmaker and Assigns. I acknowledge and agree that I have no further right to additional consideration or accounting, and that I will make no further clam for any reason to the Photographer / Filmmaker and Assigns.

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.

Signature: _____ **Date** _____

Driver License or other ID: _____

Print Name: _____ **E-Mail:** _____

Address: _____ **Phone Number (____) ____ - _____**

City: _____ **State:** _____ **Zip:** _____ - _____

Witness: _____ **Date** _____

Address: _____ **Phone Number (____) ____ - _____**

City: _____ **State:** _____ **Zip:** _____ - _____