



Florida Department of Agriculture and Consumer Services
Florida Forest Service

**STATE FOREST PHOTO CONTEST
PHOTOGRAPH SUBMISSION / RELEASE FORM**

ADAM H. PUTNAM
COMMISSIONER

Photographer's Name: _____

Address: _____

Email: _____

¹ Name of Photograph	Date Taken	State Forest	² Category	Description of Photograph

¹ Please note that the name of the photograph listed needs to match the name of the photograph file submitted by email or CD.

² Categories are: (1) Nature, (2) Recreation, and (3) Artistic.

I do hereby make the following statements, releases, assignments and assurances to the Florida Department of Agriculture and Consumer Services ("Department"): I have read the State Forest Photo Contest Rules, I certify that I ("Photographer") am the person who took the photograph(s) submitted herewith (collectively, the "photographs"), and I have not assigned any of my rights associated with the photographs to any third party and have sole, complete and unrestricted authority to enter into this release and to grant the rights described in this release. I release the Department from any liability whatsoever that arises from their use of the photographs except for uses that violate the terms and conditions of this release. I hereby grant the Department the royalty-free and nonexclusive right to distribute publish and use the photograph(s) in publications to promote Florida's state forests and the Department or to use as they see fit.

Print Name of Photographer

Signature of Photographer

Date

CONSENT OF GUARDIAN

I am the parent or legal guardian of the above named minor and hereby approve the above release and waive any rights in the premises.

Print Parent/Guardian Name

Signature Parent/Guardian

Date