

PHOTOGRAPHY CONSENT FORM - INSTRUCTIONS

Parties

I, [NAME OF AUTHORIZED REPRESENTATIVE] (the “Releasor”), with a mailing address of [STREET ADDRESS OF AUTHORIZED REPRESENTATIVE], City of [CITY NAME], State of [STATE NAME], grant permission and give my consent to [NAME OF FUNERAL HOME] (the “Releasee”) to photograph the requested tattoo and to Tattoo Memorials (the “Secondary Releasee”) for the use of the photograph(s) to create remembrance art:

Confirmation of Age and Authorized Representative

- Releasee Representative to initial first bullet.
- Releasor to initial second bullet.

Description of Photographed Tattoo Provided by Releasee

- If more than one tattoo is desired, please complete a consent for each tattoo.
- “Subject Matter” means brief description of the tattoo. For example: Eagle, Globe and Anchor USMC.

Ownership and Use of Photograph(s)

- Releasor to initial.
- Photograph(s) become the sole property of Secondary Releasee. Privacy of the deceased is paramount and a discrete chain of custody that ends in destruction of photograph(s), as outlined by the Releasor, ensures this. Secondary Releasee will use photograph(s) for the sole purpose of completing ordered work and will not disclose photograph(s) to any other party (including the Releasor) or use for marketing or any other purpose.

Disposition of Photograph(s)

- The first bullet must be initialed by the Releasor.
- The second bullet OR the third bullet must be initialed by the Releasor.

Required Signatures

- The Releasor’s title must be “Authorized Representative”.