

**Photographer
Permission Form**

EARLHAM

I give Earlham College permission to use photographs taken by me, that I have provided, in its promotional materials and publicity efforts.

I understand that these photographs may be used in any publication, print ad, direct-mail piece, electronic media (e.g. video, CD-ROM, Internet, Web site) or other form of promotion in perpetuity without remuneration or further consent.

I warrant that I hold all rights to these photographs, including the right to freely give the image to Earlham for reproduction and/or repurposing without remuneration or profit, and I will make no monetary claim against Earlham College for the use of the photographs. I further warrant that, if applicable, I have obtained necessary releases from the subjects, owners or licensors appearing in this image and that I shall bear any legal claim against the veracity of these statements and will hold harmless Earlham College and its assigns. I understand that Earlham College will run a photo credit if possible, but it is under no obligation to do so.

Name (print full name): _____
first middle last

Date: _____ Signature: _____

Relationship to Earlham: _____

Relation to subject: _____

Home address _____
number and street city state ZIP code

Telephone (_____) _____ E-mail _____

Photo Credit: _____

Requested by: _____

**Return completed form to:
Public Affairs Office
Earlham College
Richmond, Indiana 47374-4095**