



PERMISSION TO USE PHOTOGRAPH

Subject: _____

Location: _____

I grant to Georgia Dressage and Combined Training Association, its representatives, and associates the right to take photographs of me and my property in connection with the above-identified subject. I authorize Georgia Dressage and Combined Training Association, its assigns, and transferees to copyright, use and publish the same in print and/or electronically.

I agree that Georgia Dressage and Combined Training Association may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

I have read and understand the above.

Signature: _____

Print Name: _____

Organization Name (if applicable): _____

Address: _____

Date: _____

Signature, Parent or Guardian: _____
(if under 18 years)

Print Name, Parent or Guardian: _____
(if under 18 years)