



**WILTON SIMPSON
COMMISSIONER**

Florida Department of Agriculture and Consumer Services
Division of Administration

MODEL RELEASE

I, _____ hereby give the Florida Department of Agriculture and Consumer Services (the "Department") the sole and irrevocable right to use my name, voice recording, picture, portrait, photograph or image in all forms and media and in all manners, including composite, edited or altered representations, for advertising, educational or any other lawful purpose, pertaining to the statutory authority of the Department and I waive any right to inspect or approve the finished product, including written copy, that may be created in connection therewith.

I understand that I will receive no compensation for my appearance or participation in said media.

I agree to hold the Department, its employees, and agents harmless from any and all claims, liabilities, causes of action or damages whatsoever, including all costs and attorney's fees, arising from or in connection with the use of my name, voice recording, picture, portrait, photograph or image pursuant to the terms of this release.

Signature	Date	Address
Print Name		Address

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.

Signature of Parent or Guardian	Date	Address
Print Name		Address