

**Berwyn Public Library**  
2701 S. Harlem Avenue

**CONSENT FORM**

**For use of Photographs, Video and Audio Recordings**

Permission is hereby granted to the Board of Trustees and Employees of the Berwyn Public Library to use my image in photographs or my likeness in videography or my voice in audio recordings for the library's newsletter, web site and other publications that promote the library or call attention to future programming. Permission also is granted to share these audio and visual images with the media. It is understood that consent is granted only for promotions and public relations activities for, or on behalf of, the library, and that no further permission or notification is needed before they are used.

By this permission, it is understood that there will be no fee charged to me and no fee paid for use of the photographs or video or audio recordings now or in the future. I agree to hold the Library Board and Staff harmless from any liability arising from the use of the images, including any unintentional misuse, distortion or optical illusion that occurs in the processing, production, publication or distribution of the final product.

**For Persons age 18 and over**

I certify that I am over 18 years of age, and I give permission for the Berwyn Public Library to use photographs, video or audio recordings as stated above.

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Home Phone: ( ) \_\_\_\_\_

**For Persons age 17 and under**

I certify that I am the parent or legal guardian of \_\_\_\_\_ *(please print)* and I hereby give permission for the Berwyn Public Library to use photographs, video or audio recordings as stated above. I understand that no further identification of the minor child will be provided without my **written** permission other than that granted below:

*(Please check the appropriate line and insert your initials at the end.)*

YES \_\_\_ the library may publish my child's name \_\_\_\_\_ *(Initials)*

NO \_\_\_ the library may **NOT** publish my child's name \_\_\_\_\_ *(Initials)*

Printed Name of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Home Phone: ( ) \_\_\_\_\_

**For Library Use Only**

Staff Member Signature \_\_\_\_\_ Date: \_\_\_\_\_