



Photo Release Form

2024 MN Prevention Program Sharing Conference

Permission to Use Photograph(s)

I agree to be photographed:

- ◆ I grant to the Minnesota Prevention Resource Center (MPRC), its representatives and employees, the right to take photograph(s) of me and my property at the 2024 Minnesota Prevention Program Sharing Conference. I authorize MPRC to copyright, use and publish the photograph(s) in print and/or electronically.
- ◆ I agree that MPRC 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 do not agree to be photographed. (If you do not wish to be photographed, you will get a sticker to place on your nametag when you check-in at the conference)

Full Name: _____

Date: _____

Signature: _____
(or signature of Parent/Guardian if under 18)