**Utah Association of Conservation Districts (UACD) 2025 Photo Contest – Photo Release Form**

*This form must be completed and signed for each recognizable person appearing in a photo submitted to the UACD 2025 Photo Contest.*

**Photographer's Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Photographer’s Email:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Title/Description of Photo:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date Photo Was Taken:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Person in Photo (Subject) – Consent and Release**

I hereby give permission to the Utah Association of Conservation Districts (UACD), and the National Association of Conservation Districts (NACD), to use my image, likeness, or appearance in any photograph submitted for the UACD 2025 Photo Contest. I understand that my image may be used in promotional materials, publications, websites, social media, and displays.

I acknowledge that I will not receive any compensation for the use of my image and that UACD and NACD retain the right to use this image for non-commercial educational and promotional purposes.

I release and hold harmless UACD, NACD, and their representatives from any claims, damages, or liability resulting from the use of my image as described above.

**Full Name of Subject (Printed):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of Subject:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If the individual is under 18 years of age, a parent or guardian must also sign:

**Parent/Guardian Name (Printed):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of Parent/Guardian:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Return this form:** Upload it through the contest submission form for each photo where a person is identifiable.

Questions? Visit [www.uacd.org](https://www.uacd.org) or email desiree.vandyke@uacd.org