



I, _____ hereby permit and authorize the City
(Print in Full – First, Middle Initial & Last Name)

of Markham (the “City”) to take my photograph/image and/or the photograph/image of
_____, for whom I am the parent and/or
(Print in Full – First, Middle Initial & Last Name)

legal guardian.

I acknowledge and agree that the City may publish or use the image for any City purposes by any means whatsoever including, but not limited to electronic or digital means.

I acknowledge that the City may not be able to control the distribution or use of the image by other than City representatives.

I agree that this Consent and Release is given in perpetuity and for no consideration, credit, acknowledgement or financial recompense, now and in the future.

I hereby hold the City harmless for any claims, actions, debts, damages, injuries or losses that may arise or be incurred as a result of the taking, use, publication or distribution of the image and I agree to indemnify the Town against any third party claims, actions, damages, injuries or losses brought or assessed against or incurred by the Town for the use of the image(s).

Contact Information

Signature: _____ Date: _____

Address: _____
Number Street Town Province Postal Code

Telephone: _____ Email: _____

To be completed by City Representative:

City Representative: _____

Department: _____ Dated: _____