

Model Release



Leidos Biomedical Research, Inc.

Please type or print information clearly

I hereby give the FNL contractor permission to record my image and/or voice, and grant the FNL contractor all rights to use these still, sound, or moving images in any medium for educational, promotional, advertising, or other purposes that support the missions of the FNL contractor and/or the National Cancer Institute. I agree that all still, sound, or moving images belong to the FNL contractor and may be retouched or enhanced as deemed appropriate by the owner.

Model Information

1. First Name	2. Last Name
3. Organizational Affiliation or Laboratory Name	
4. Telephone	5. E-mail Address

Employment Identification

6. Model is: <input type="checkbox"/> U.S. Government Employee (Agency, Institute, Branch) <input type="checkbox"/> Contractor Employee (Name of Contractor) <input type="checkbox"/> Other (Specify):

Limitations on use

7.

Signature of Model (if 18 years or older)

8. Signature	9. Date
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Signature of Parent or Guardian (if a minor)

10. First Name	11. Last Name
12. Signature	13. Date

Signature of Witness

14. First Name	15. Last Name
16. Signature	17. Date

Form must be sent to Scientific Publications, Graphics & Media (SPGM) in Building 362, where it will be kept on file.

SPGM Internal Use:

18. SPGM Job Number

Model Release – Instructions

1. Print the first name of the model (individual) being photographed.
2. Print the last name of the model being photographed.
3. Enter the model's organizational affiliation or laboratory name.
4. Enter the model's phone number.
5. Enter the model's e-mail address.
6. Select employment status (i.e., U.S. government, contractor, other).
7. Enter any limitations the model specifies for use of the images, if any.
8. Enter the model's signature, if the model is 18 years or older.
9. Enter the signature date.
10. Enter parent or guardian's first name.
11. Enter parent or guardian's last name.
12. Enter parent's signature, if the model is a minor.
13. Enter the signature date.
14. Enter witness' first name.
15. Enter witness' last name.
16. Enter witness' signature.
17. Enter the signature date.
18. Enter the SPGM job number.