

## Personal Release

I authorize Clackamas County Master Gardeners Association™ ("hereinafter referred as CCMGA") to publish photos taken of me during my participation in chapter activities and during my duties volunteering for OSU Master Gardener Program. I understand that CCMGA may use such photographs of me with or without my name in any medium for such purposes as publicity, illustration, advertising, and Web content on any of the web pages the CCMGA administers. I waive any right to inspect or approve the finished medium or the use to which it may be applied.

I represent that I am at least 18 years of age and that I have read and fully understood the above paragraph and am knowingly and voluntarily executing this release.

Date Signed

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Name (PLEASE PRINT)

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Street

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City, State, Zip

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Telephone (area code first)

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Signature

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