



PHOTO & VIDEO RELEASE FORM

CONTACT INFORMATION

Name

Street Address

Address Line 2

City

State

Zip

Phone Number

Email

PHOTO / VIDEO / STORY RELEASE AGREEMENT

I hereby grant permission to H&H Color Lab, Inc. to use photographs, stories and/or video submitted by me in any news releases, online, product samples, website imagery, newsletters, social media, publication ads, various marketing promotions and other communications.

Signature

Printed Name

Date

DESCRIPTION OF SUBMISSION

Description