



Your Name (s): _____

Age(s) of Portrait Subject(s): _____

*If any subject is under the age of 18, The following information must be filled out by Parent/ Guardian.

Parent/Guardian Name: _____

Address: _____

Session Location: _____

Photo Shoot Contract Basic Information

Type of session: Newborn Baby Child/Children Family

Senior Corporate Talent _____

Subject's Email: _____

Date/Time of Session _____

This is an agreement between Hilliary Photography, LLC ("Photographer"), and _____, ("Client"), outlining the terms of a photography session, ("Shoot"), performed on _____ at ____:____ and use of all products from Shoot, ("Images").

All Images and rights therein, including copyright, remain the sole and exclusive property of Photographer.

Unless otherwise provided herein, any grant of rights from Photographer to Client is limited to the private, personal use of photographic material purchased by Client. Photographer will use her professional judgment and sole discretion to select which photos to deliver. Such selection will constitute all images that will be made available to client. No photo or digital negative of image shall leave Hilliary Photography, LLC that is not processed and acceptable to the photographer. You have chosen the \$ _____ Session which was paid in full at time of booking. (*If you have purchased the 2 hour session- a minimum product purchase of \$299 is required.*) Client has no rights under this agreement until all fees are paid in full. Client will be charged 100% fee and expenses for any re-shoot required by Client. All images from this Shoot remain property of Photographer and may be used as advertising, display, or any purpose thought proper by Photographer without additional compensation to Client. Web images will be released after completed purchase. You are agreeing to pay for the balance of your package by signing this document. All fees due before any web images will be released as written in your package details.

By signing this agreement, Client witnesses an understanding of the above agreement and accepts all of the terms listed therein. By signing this agreement Client is agreeing to terms of financial responsibility.

Client Print _____

Client Sign _____

Date: _____

Hilliary Photography, LLC

216-256-6390



MODEL RELEASE FORM

I, the undersigned, do hereby consent and agree that Hilliary Photography LLC, its employees, and agents have the right to take photographs, videotape, or digital recordings of me on _____ and to use these in any and all media, now or hereafter known, and exclusively for the purpose of promoting Hilliary Photography, LLC.

I do hereby release to Hilliary Photography, LLC, its agents, and employees all rights to exhibit this work in print and electronic form publicly or privately. I waive any rights, claims or interest I may have to control the use of my identity or likeness in whatever media used. I waive any right that I may have to inspect or approve any finished product or products or the advertising copy or printed matter that may be used in connection with such photographs or the use to which it may be applied.

I understand that there will be no financial or other remuneration for recording me, either for initial or subsequent transmission, publication or playback. I also understand that Hilliary Photography, LLC is not responsible for any expense or liability incurred as a result of my participation in this recording, including medical expenses due to any sickness or injury incurred as a result.

I hereby warrant that I am a legal competent adult and a parent or legally appointed guardian of the minor, and that I have every right to contract for the minor in the above regard. I state further that I have read the above authorization, release, and agreement, prior to its execution, and that I am fully familiar with the contents of it. This release shall be binding upon the minor and me, and our respective heirs, legal representatives, and assigns.

Father, Mother or Legal Guardian (please print): _____

Guardian's Signature: _____

Minor _____

Minor's Signature: _____

Address: _____

Date: _____