



COUNTY OF YOLO

Office of the County Administrator

Patrick S. Blacklock
County Administrator

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Photo/Video Release Form

By signing below, I hereby grant to Yolo County the right and license to use my name, image (in video or photography), voice (as recorded on audio or videotape), likeness and comments in Yolo County materials for internal and external audiences such as diverse educational and outreach settings. These materials include but are not limited to: advertisements, brochures, news releases, magazines, newspapers, newsletters, videos, social media and websites.

Name (print) _____

Address _____

E-Mail _____ Telephone _____

Signature _____ Date _____

Photo/Video Release for a Minor (Anyone under the age of 18)

I, _____, parent/guardian of _____, hereby grant to Yolo County the right and license to use his/her name, image (in video or photography), voice (as recorded on audio or videotape), likeness and comments in Yolo County materials for internal and external audiences such as diverse educational and outreach settings. These materials include, but are not limited to: advertisements, brochures, news releases, magazines, newspapers, newsletters, videos, social media and websites.

Name (print) _____

Address _____

E-Mail _____ Telephone _____

Signature _____ Date _____

Official Use Only

Event _____ Printed Name of Presenter _____

Department of _____ Signature of Presenter _____