

# PHOTO RELEASE FORM

I, \_\_\_\_\_, (the "Releasor") of  
\_\_\_\_\_ (company/organization) do

GRANT permission and consent to \_\_\_\_\_ (the "Releasee") to be photographed at PJM Interconnection stakeholder meetings. I understand that I may revoke this authorization at any time by notifying the Releasee in writing. The revocation will not affect any actions taken before the receipt of this written notification.

DO NOT GRANT permission and consent to \_\_\_\_\_ (the "Releasee") to be photographed at PJM stakeholder meetings.

We, the Releasor and Releasee, have understand and agree to the aforementioned terms and conditions.

**Releasor's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

## Releasee's Contact Information

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_