

LI APA Membership Photo Release Waiver

I, _____, hereby grant permission for the LI APA to post my photograph that may be taken at an LI APA event or function on the LI APA Facebook account. I understand that the sole purpose of using membership pictures at these types of events is to share our membership experiences with others and to also drive and maintain the LI APA membership enrollment.

I further waive any claim for compensation of any kind for the LI APA's use of photographs of me.

LI APA will not edit, crop, or retouch any photos taken.

LI APA Membership Name _____

Signature _____

Date _____