

Publication/Website Picture Permission Form

Please fill out and sign the appropriate statement to either give or to decline permission to use pictures of yourself or your children on the Virginia Society of Radiologic Technologists website. Please return this form to the VSRT Executive Secretary.

To GRANT permission to use your picture

I _____ (Please PRINT your name) **GRANT** permission for the Virginia Society of Radiologic Technologists (VSRT) to publish photos of myself on the society's website. I give the VSRT the perpetual, royalty-free right to use my photo(s) in a manner limited to websites. I understand that the website has a large audience and that my photo will be available to the general public. I further understand that the VSRT assumes no liability or responsibility whatsoever concerning any consequences of such use. I further state that I have the right to give this permission as I am of legal age. I understand that if I give notice to the webmaster that I object to any particular picture on the website, it will be removed as soon as possible. Publication of these photos on websites may include **FIRST** names for the identification purposes unless I check the box below that I do not give permission for my name to be used.

_____ Please DO NOT include my first name with the photo on websites.

To REFUSE permission to use your picture

I _____ (Please print your name) **REFUSE** to grant permission for the Virginia Society of Radiologic Technologists to publish photos of myself on the website. Any pictures which include a recognizable picture of myself may not be used unless I change this statement with particular written permission to the contrary for that instance. I further state that I have the right to refuse this permission as I am of legal age.

SIGNED _____ DATED ____/____/____