



# NEW YORK STATE ART TEACHERS ASSOCIATION

## Permission Request/Release

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Date: \_\_\_\_\_

I, \_\_\_\_\_, hereby give the New York State Art Teachers Association (NYSATA) the absolute right and permission, in regard to my artwork and identifying information (name, school, etc):

(a) To copyright and publish the art in NYSATA's own name in conjunction with a digital or print article available to the NYSATA membership and/or the public.

(b) To use, re-use, re-publish the same in whole or in part, separately or in conjunction with other artwork in any medium or for any purpose whatsoever, including (but not limited to) illustration, promotion, and advertising.

I hereby release and discharge the New York State Art Teachers Association from any and all claims and demands arising out of or in connection with the use of the artwork.

I have read the foregoing and fully understand the contents thereof.

Name \_\_\_\_\_

Address \_\_\_\_\_

Signature \_\_\_\_\_

### If under age 16, adult signature required:

I represent that I am the (father, mother, guardian) of \_\_\_\_\_, the above named child.

I hereby consent to the foregoing on his/her behalf.

Name \_\_\_\_\_

Address \_\_\_\_\_

Signature \_\_\_\_\_