

# Copyright Release Form

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**Refreshed Memories will not perform any service using copyrighted work without written consent from the copyright owner.**

I, \_\_\_\_\_, of \_\_\_\_\_ hereby grant permission to  
(image/work creator) (company)

Refreshed Memories to perform the following service(s):

- Photo Restoration
- Photo Retouching
- Colorizing black & white image/ Creating black & white or sepia toned image from colored original
- Photo Manipulation (transforming original image, using part or all in final piece)
- Photo Collage / Montage composition
- Other \_\_\_\_\_

using my original work \_\_\_\_\_  
(title/description)

**This final image will be for the customer's personal use, and is not to be sold or displayed publicly.**

\_\_\_\_\_  
Photographer/Artist/Author signature

\_\_\_\_\_  
Date

Mailing Address:

Telephone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Release Fee Required? \_\_\_\_\_ Amount Paid \$ \_\_\_\_\_

Release Fee Confirmation Number: \_\_\_\_\_

When completed, please bring this form to your scheduled Refreshed Memories consultation.

**OR** e-mail a scanned copy (containing signature) to refreshedmemories@charter.net

**OR** fax a copy to: (304) 422-4194, with a cover sheet

Please include your contact information and order number (if applicable) with all communication