

Photographer Release Form

I hereby grant permission to NRS unlimited use of my photograph(s) on its World Wide Website, banner advertisements or in other official printed publications without further consideration. I acknowledge NRS' right to use, reproduce, modify, and adapt my photograph(s) at its own discretion. I also acknowledge that NRS may choose not to use my photo at this time, but may do so at a later date.

I also understand that if my image is posted on the website, the image can be downloaded by any computer user. Therefore, I agree to indemnify and hold harmless from any claims; NRS, its Employees, Dealers, and Affiliates.

I understand that at this time NRS does not return any submitted photos and images.

I am of legal age and freely sign this release, which I have read and understand.

Signature:

Date:

Print Name:

Address:

City, State, Zip:

Country

Phone Number:

e-Mail Address

Please list below the name of the image(s) you are submitting to NRS below: