

## Permission to Use Photograph

Person's name(s): \_\_\_\_\_

I grant to City of Hartsville, its representatives and employees the right to take photographs in connection with the above-identified subject. I authorize City of Hartsville, its assigns and transferees to copyright, use and publish the same electronically.

I have read and understand the above:

Signature \_\_\_\_\_

Printed name \_\_\_\_\_

Address \_\_\_\_\_

Date \_\_\_\_\_

Signature, parent or guardian (if under 18) \_\_\_\_\_



City of Hartsville  
P.O. Drawer 2497  
Hartsville, SC 29551

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