



Model Application

First Name: _____ Last Name: _____ MI _____

Address: _____ Apt. # _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell: _____ Work: _____

Occupation: _____ E-mail: _____

Height: _____ Bust: _____ Dress Size: _____

Weight: _____ Waist: _____ Pant Size: _____

Shoe: _____ Hips: _____ Tattoo: _____

Eye Color: _____ Hair Color: _____

I agree to hold harmless Luxe Fashion Group LLC, its members, officers, trainers, and all officials from all damages, costs, injuries, and expenses, however incurred during or as a result of my participation in events and marketing photoshoots.

Signature: _____ Date: _____

Print: _____

Luxe Fashion Group LLC
Fashion Production & Marketing
www.luxefashiongroup.com
Dona Crowley – Executive Director
(727)-580-9328

Photo Release

I hereby grant the following rights to Luxe Fashion Group LLC , and any of its affiliates, licensees, subsidiaries, or assigns rights Luxe Fashion Group in consideration of their possible use of my visual depiction, oral statements or any other information and materials supplied by me (collectively the “material”).

I acknowledge that no promise or representation has been made to me, and Luxe Fashion Group LLC shall have sole and absolute discretion and creative control in determining when or whether the material should be used in any other manner.

Luxe Fashion Group LLC shall have total ownership of the material; the right to be broadcast, exhibit, distribute or display the material on broadcast or cable television, satellite transmission, films, photographs, videotapes, videocassettes, videodiscs, the print media, the Internet, radio format, record album, audiocassette format, or by any other method or devise now known or hereafter devised; the right to copyright the material; and the right to license others to use these rights.

Luxe Fashion Group LLC may use my name, likeness, voice, biographical information and/or other material supplied may be for purposes of advertising, publicity and promotion, but not as a direct endorsement for any product or service.

I affirm that the use of my likeness, and/or material supplied by me as described above will not violate the rights or any person or organization and will not incur any liability for payment to any person. I further agree to hold Luxe Fashion Group LLC harmless from any and all liability that Luxe Fashion Group LLC may incur as a result of its use of the material as stated herein.

ACCEPTED AND AGREED:

Signature of Participant: _____

Print Name of Participant: _____

Date: _____

Signature of Parent or Legal Guardian is REQUIRED if participant is under age.

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Liability Release Form **(Release of All Claims)**

In consideration for being accepted by Luxe Fashion Group LLC for participation in events and marketing campaigns, I do hereby release, forever discharge and agree to hold harmless Luxe Fashion Group and the directors thereof from any and all liability, claims or demands for personal injury, sickness or death, as well as property damage and expenses, of any nature whatsoever which may be incurred by the undersigned and the participant that occur while said person is participating in the above –described trip or activity including recreation and work activities. The undersigned further hereby agrees to hold harmless and indemnify said company, its directors, employees and agents for any liability sustained by said acts of said participant, including expenses incurred attendant thereto.

The undersigned further consents to the administration of first-aid and /or doctor’s care, or any other form of medical treatment necessitated by illness or injury that may require the same. In the event of the necessity of such care or treatment as heretofore described, the undersigned agrees to hold harmless and indemnify said company, its directors, employees and agents from any acts of malfeasance, and/or failure to act on the part of those chosen to administer medical care on behalf of the participant.

ACCEPTED AND AGREED:

Signature of Participant: _____

Print Name of Participant: _____

Date: _____

Signature of Parent or Legal Guardian is REQUIRED if participant is under age.

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