1 Old Sturbridge Village Road  
Sturbridge, MA 01566  
(508)-347-0274  

Model Release Form

I hereby allow Old Sturbridge Village to take photographs, film, or any audiovisual material of me and use these materials for advertising, publicity, promotion, educational programs, or any other related purposes of the museum without any fee whatsoever. I understand that Old Sturbridge Village may incorporate the photographs, film or audiovisual material as desired and may authorize others to use the photographs, film or audiovisual materials. Old Sturbridge Village shall own all the rights, title and interest to the photographs, film or audiovisual material without limitations.

Release from Liability

In consideration of receiving permission from Old Sturbridge Village (hereafter OSV) to enter upon the premises identified, the receipt of such permission being hereby acknowledged, I the undersigned do hereby release OSV, its agents, officers, employees, and volunteers, and any and all subordinate or affiliated organizations or persons sponsoring, hosting or associated with such activity, of and from any liability, claims, demands, actions and causes of action whatsoever, arising out of or related to any loss, damage or injury, including death, that may be sustained by me or my property while in or on these premises. I am duly aware of the risks and hazards inherent upon entering said premises, and/or enroute to or from the same, and in participating in any activities held on said premises. I hereby voluntarily elect to enter upon said premises and/or participate in such activities knowing the present condition and intended use of said premises, and knowing that said condition and/or use may become hazardous during the time I am upon said premises. I assume all risk, loss, damage, or injury, including death, which may be sustained by me, or to my property, while upon said premises or enroute to or from the same. This release shall be binding upon my distributees, heirs, next of kin, executors and administrators.

In signing the foregoing, I hereby acknowledge that I have read and understand these releases and sign them voluntarily. I am of sound mind, not a minor, and over the age of majority. As the parent of a minor child who is participating, I hereby sign on his/her behalf.

Print name: _____________________ Date: __________
Signature of Participant or Parent/Guardian (if minor): _____________________
Print Troop, Den, Pack, or Service Unit Name: _____________________

Upon completion of this form, please mail to the address above, attn: Museum Education. You may also email completed forms to jsilverio@osv.org.