MOUNTAIN LIVING

HOME OWNER'S RELEASE

NAME:	 DATE:
ADDRESS:	
CITY/STATE/ZIP:	
EMAIL:	
DAY PHONE:	
STORY SUBMITTED BY NAME:	
EMAIL:	

I grant WiesnerMedia, its successors, licensees, representatives and assignees, permission to publish photographs of my home, property and family (if applicable), in print and/or electronically, for editorial and promotional purposes. I understand that my name may be used in conjunction with their appearance if I authorize it below, and that I will receive no financial compensation for publication of these photographs.

I acknowledge that WiesnerMedia, in publishing these photographs, will be held harmless from any and all liability for any claims arising out of, or in any way connected with, any use of the photographs or textual description. Furthermore, I will not allow any other periodical to publish photographs of my home between this day and *Mountain Living* publish date, and for three months after the *Mountain Living* publish date, unless written permission is secured in advance.

I authorize the use of my name and/or likeness in _____

I decline to be identified by name and/or likeness in _____

* Homeowners requesting anonymity in the story agree to an interview and story fact check. The story will include the home's general location (town/state).

Home previously published in (please list all prior/pending publications and dates)

	DATE:
	DATE:
	DATE:
SIGNATURE:	DATE:

PLEASE RETURN FORM TO:

Darla Worden via **email** (dworden@chlml.com) or mail at 1780 South Bellaire Street, Suite 505 | Denver, CO 80222