

GENERAL RELEASE FORM

Producer Name: _____ (the "Producer")

Project Title: _____ (the "Project")

I grant the Producer the irrevocable right and permission to use my image, likeness and sound of my voice as photographed or recorded on audio and/or video in connection with the Project without payment or any other consideration. I understand that my image may be edited, copied, exhibited, published or distributed and I waive the right to inspect or approve the finished Project where my likeness appears (or does not appear). I agree that I may be identified by name and/or title in printed, Internet or broadcast information that might accompany the photographs and/or recordings of me.

I authorize the Producer to use and to license others to use such photographs and/or recordings in connection with the Project in any manner or media whatsoever, including without limitation unrestricted use for purposes of publicity, advertising and sales promotion. I further acknowledge that the Producer owns all rights to the results and proceeds of my services rendered in connection with the Project.

I expressly release the Producer, and Producers' agents, employees, licensees and assigns from and against any and all claims, demands, rights, promises, damages and liabilities which I have or may have for invasion of privacy, defamation, appropriation of likeness or any other cause of action arising out of the use, production, distribution, broadcast or exhibition of the Project.

There is no time limit on the validity of this release nor is there any geographic limitation on where the Project may be distributed.

By signing this form I acknowledge that I have completely read and fully understand the above release and agree to be bound thereby. I hereby warrant that I am eighteen (18) years old or more and am competent to contract in my own name or, if I am less than eighteen years old, that my parent or guardian has signed this release form below. This release is binding on me and my heirs, assigns and personal representatives.

Signature

Printed Name

Date

If individual photographed/recorded is under eighteen (18) years old, the following section must be completed by a parent or guardian: I have read and I understand this document. I understand and agree that it is binding on me, my child (named above), our heirs, assigns and personal representatives. I acknowledge that I am eighteen (18) years old or more and that I am the parent or guardian of the child named above.

Signature of Parent/Guardian

Printed Name

Date