

# TEEN VIDEOFEST 2010

## Talent Release Form

Important Notice: Any participant who is NOT an eligible team member MUST complete a talent release form.  
(i.e., police officer, nurse, paramedic, someone giving a personal testimony, an extra, etc.). **Photocopy as needed.**

I, \_\_\_\_\_ (*name of person in recording*),  
hereby assign rights to the videotape and sound recording made of me on  
\_\_\_\_\_, by, \_\_\_\_\_, hereafter  
“videographer,” to the videographer, and to his/her agents, principals, representatives and  
assigns (hereafter “others”.) I also give consent to videographer and others to use this  
recording and my image or voice for any reproduction, copyright, exhibition, broadcast  
and/or distribution in whole or in part, without limitation or compensation, for the  
purpose of promoting public health.

**Special request (check one option):** My name **MAY** \_\_\_\_\_ **MAY NOT** \_\_\_\_\_ **be used in association with this recording.**

I certify that I am over 18 years old. \_\_\_\_\_  
*Signature (required)* *Date*

**OR**

*I am under age 18.*

\_\_\_\_\_  
*Parent/legal guardian Signature (required)* *Date*

