

Your Production Company Name
Company Address
Company Phone
Company FAX
Company email

PHOTO/VIDEO/FILM RELEASE

I, _____ (name) hereby give _____ (hereinafter referred to as the Filmmaker), his/her licensees, successors, legal representatives, and assigns the right and permission to use my name and to use, reproduce, edit, exhibit, project, and display videotaped images of me with or without my voice photographed, taped, videotaped, and/or recorded on _____ (date).

Printed name of Interviewee/Actor/Actress/Model: _____

Signature: _____ Date: _____

Printed name of parent or guardian if signee is not of legal age: _____

Signature of Parent or Guardian: _____ Date: _____