## **GENERIC TALENT RELEASE FORM**

PROGRAM	
TITLE:	
PRODUCTION DATE:	
PRODUCTION LOCATION:	
PRODUCER:	
I have hereby participated as indicated on the a understand will be produced and recorded for ai the Hockomock Film Festival. I agree that as far program may be edited and used in whole or in (including over public television stations and over stations and CATV channels) for audio and/or viclosed circuit exhibition purposes, and all other manner or media, in perpetuity.	ring and distribution as part of as I am concerned, this part for broadcasting purposes er other television and radio sual, cassette, web site, and
I consent to publication of the program transcriptoradcast and also consent to use my name, like material about me in connection with the program promotional purposes. I expressly release the prodefamation, and other claims I may have arising publication, or promotion of this program.	eness, voice, and biographical am's publicity and other roducer from any privacy,
SIGNED: (by	parent or legal guardian if under 18)
DATE:	-
PRINT NAME:	
(both adult and minor if applicable)	

ADDRESS:	
TELEPHONE:	
Print name how you would like it displayed on	
television:	