## TALENT RELEASE FORM

Talent Name:	Project Title:	
I hereby consent for value received to the use (full or in part) of all vide voice and/or written extraction, in w performance for the purposes of illu	otapes taken of me and/or record whole or in part, of such recordings	ings made of my s or musical
at	_ on	_ 20
(Recording Location)	(Month) (Day) (Year)	
by	for	
(Producer)	(Producing Organization	)
Talent's signature		
Address	City	
State Zip code		
Date:/		
If the subject is a minor under the laws of the state where modeling, acting, or performing is done:		
Legal guardian		
(sign/print name)		
Address	City	
State2	Zip Code	
Date://		