

## Personal Release

Participant Name (print name) \_\_\_\_\_

Program Title ("Program") \_\_\_\_\_

Production Date(s) \_\_\_\_\_

In consideration of my appearance on the above Program and other good and valuable consideration, receipt of which is hereby acknowledged, I hereby authorize \_\_\_\_\_ ("Producer") to record my name, likeness, image, voice and participation in and performance on film, tape or otherwise for use in the above Program or parts thereof. I agree that the Program may be edited and otherwise altered at the sole discretion of the Producer and used in whole or in part for any and all broadcasting, audio/visual, and/or exhibition purposes in any manner or media, in perpetuity, throughout the world. I understand that I have no rights to the Program or any benefits derived therefrom.

I consent to the use of my name, likeness, voice and biographical material about me in connection with the promotion of the Program.

I hereby waive any right I may have to inspect and approve the finished product or such written or spoken copy that may be used in connection therewith, or the use to which it may be applied.

I agree to indemnify and hold harmless Producer, Windward Community College and its representatives from and against all claims, losses, expenses and liabilities of every kind including reasonable attorney's fees arising out of the inaccuracy or breach of any provision of this Agreement. I expressly release Producer, Windward Community College and its representatives from any and all claims arising out of the use of the Program.

Participant Signature \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

Email and Phone \_\_\_\_\_

*If the Participant is under eighteen (18) years of age, the parent or legal guardian of the Participant should sign below.*

I am the parent or legal guardian of \_\_\_\_\_ and do hereby consent and grant my permission to all of the foregoing.

Signature \_\_\_\_\_ Date \_\_\_\_\_