

Faces of Hunger in the US

PHOTO RELEASE FORM

VIDEO, PHOTOGRAPHIC & AUDIO REPRODUCTION CONSENT & RELEASE AGREEMENT

During the filming of certain footage in connection with the film tentatively entitled _____ (the "Program"), video images, photographs and audio recordings of you may be made by _____ (the "Producer"). As a result of your presence during this filming, it is likely that you may be included in any such video, photographic or audio reproduction in perpetuity to any and all licenses and assignees connected with the footage.

In consideration for the Producer allowing you to be present during the filming, the receipt of which is hereby acknowledged, you, by signing below, irrevocably authorize the Producer, its legal representatives, successors, assigns and those acting under its permission and authority, to copyright, publish and to use in all forms, media and manner for advertising, trade, promotion, exhibitions, or any other lawful purpose whatsoever, video, photographic and audio reproductions of yourself; and agree as follows:

I do hereby waive any right that I may have to inspect or approve the finished product(s) or other copy arising out of or in connection with the use of any audio, photographic, print or video graphic reproduction of myself for any lawful purpose an in any manner or media whatsoever.

I hereby release and agree to hold harmless the Producer, its agents, licensees and assigns from and against any and all claims which I now have or may have in the future for invasion of privacy, right of publicity, defamation, copyright infringement, or any other causes of action arising out of the use, adaptation, reproduction, distribution, broadcast or exhibition of any audio, photographic, print or video graphic reproduction of myself for any lawful purpose and in any manner or media whatsoever.

I hereby warrant that I am of legal age and have the right to contract on my own behalf, **otherwise signature of parent or guardian will be provided.** I have read the above Release and Agreement, prior to execution, and I fully understand its contents. I also understand that this Agreement will be binding upon me and my heirs, legal representatives and assigns.

Principal Signature

Name (Please Print)

Address

Email / Telephone Number

Date

Parent or Guardian Signature

Name (Please Print)

Address

Email / Telephone Number

Date