## Release Form for Media Recording



I, the undersigned, do hereby consent an	nd agree that
its employees, or agents have the right to	o take photographs, videotape, or digital recordings of
La alamina an	and ending on
<u>.</u>	and to use these in any and all media, now or hereares
known and exclusively for the purpose o	)f, I turtue
consent that my name and identity may	be revealed therein or by descriptive text or
commentary.	•
	, its agents, and employees all
I do hereby release to	ectronic form publicly or privately and to market and sell
rights to exhibit this work in print and ele	erest I may have to control the use of my identity or
	Steet I may have to broke s
likeness in whatever media used.	
I understand that there will be no financ	ial or other remuneration for recording me, either for
initial or subsequent transmission or play	
	is not responsible for any
I also understand that	of my participation in this recording, including medical
expense or liability incurred as a result of expenses due to any sickness or injury li	ncurred as a result.
I represent that I am at least 18 years o	of age, have read and understand the foregoing
statement, and am competent to execut	te this agreement.
	Date:
Name:	Date:
Address:	
Phone:	
Witness for the undersigned:	
Signature:	