



Life Springs Church
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TALENT RELEASE FORM FOR STAGE, VIDEO, OR AUDIO PERFORMANCE

TALENT NAME: _____ D.O.B. _____

PRODUCTION TITLE: _____

RECORDING LOCATION _____ on _____
 (Physical Location/Address) (Month) (Day) (Year)

FOR THE PURPOSES OF _____

I am of full age. I hereby give **Life Springs Church/Life Springs Church Media**, its assigns, licensees, and legal representatives the irrevocable right to use my name (or any fictional name), picture, portrait, or image in all forms and media and in all manners, including composite or distorted representations, for advertising, trade, or any other lawful purposes. I hereby waive any right to inspect or approve the finished videotape, sound track, or written copy that may be created in connection therewith or the eventual use that it might be applied.

Unless otherwise stated in this release, I acknowledge that I am volunteering my time for the production and will receive no monetary compensation for my participation in this production.

I hereby release, discharge and agree to save harmless the videographer, its representatives, employees or any person or persons, or corporations, acting under his permission or authority, or any person, persons, corporation or corporations, for whom he might be acting, including any firm publishing and/or distributing the finished product, in whole or in part, from and against any liability. I acknowledge that I have read this release and am fully familiar with its contents.

SIGNATURE _____
DATE _____
PHONE _____
STREET ADDRESS _____
CITY, STATE, ZIP _____
SIGNATURE OF WITNESS _____
WITNESS (Print Name) _____

FOR MINOR CHILD (A separate release form is required for each child):

I am the parent or guardian of the minor named above and have the legal authority to execute the above release. I approve the foregoing and waive any rights in the premises.

SIGNATURE OF PARENT _____ Date _____
PARENT (Print Name) _____