Talent Release Form

INSTRUCTIONS: Every person recorded should fill out this form. Youth Group should keep a copy for their records.

Talent Name:		
Production Title:		
I hereby consent for _	(Name of Youth Group and/or Church) to use, reproduce, exhib	oit
or distribute (in full or	in part) any photographic, video, film, and/or audio recordings mad	le
of me or my likeness;	and/or any written extract of such recordings in which I may be	
included, for any purp	ose whatsoever, in any medium now known or in the future invented	l.t
hereby release, discha	erge, and agree to hold harmless(Name of Youth Group and/or Church))
and all persons acting	under its permission or authority from any liability or injury that ma	зy
occur while performin	g or appearing in the said video, audio, or photographic production.	
Talent Signature: Address:		
State:	Zip:	
Date:		
If Talent is a Minor	under the laws of the state where acting or performing is don	ıe:
Legal Guardian:	(Print name)	
Signature:		
Address:		
State:	Zip:	
Date:		