



WLBT TV-3
 715 South Jefferson Street
 Jackson, MS 39201
 (601)948-3333 fax (601)940-4435

Talent Release

In consideration of the possibility of appearing (and/or having my minor child appear) I, by signing below, hereby give and grant to WLBT TV-3 its associates and assigns, permission to photograph my likeness (and/or the likeness of my minor child) by means of video tape and/or motion picture and/or still photography in perpetuity.

I also give and grant to WLBT TV-3 its associates and assigns, permission to record, by means of any device, my voice and words spoken by me (and/or those of my minor child) in perpetuity.

Further, I give and grant to WLBT TV-3, its associates and assigns, permission to use any or all of said likenesses, voice and/or words in aforementioned video and/or film project, including advertising and promotion related to it as well as in any other productions of WLBT TV-3 including but not limited to broadcasting, direct exhibition, promotional and subsidiary purposes. This grant is made without any reservation, and I specifically disclaim any right to receive any compensation (or any share of the project's proceeds) for the use of my likeness, voice and/or words in the above project or elsewhere in perpetuity.

I hereby indemnify WLBT TV-3 and its licensees respecting any liability for use of my name, likeness, picture and/or voice, and against any claim arising out of my acts or statements in the project. I understand that nothing shall require WLBT TV-3 to include me in the project, its broadcast or future involvement with this or any other similar venture.

I have read the above authorization, release and agreement, and I am fully familiar with and agree to the contents thereof.

 Signed Date

Name (Please Print) _____

Address _____

City, State & Zip _____

Phone _____

 Witnessed Date