## **TALENT: Video and Audio Release Form**

I hereby give	(Primary Parti	cipant's name) and GCTV permission to use my
name, likeness, image, voice and/or ap	ppearance as such may be	embodied in any motion picture, print media, e like, taken or made on behalf of the GCTV Video
Contest project.	-	
I understand that by signing this form, (P	_	pove and understand that and GCTV have ownership of copyright and may
use the recordings, photos and etc. for		
I understand that I will not receive any otherwise below.	y compensation for this no	w or at any time in the future unless stated
I have read and understood this conse	ent and release.	
Name (Print):		
Signature:		
Parent/Guardian (if under 18):		
Address:		
City:	State: Zip:	
Date: / /		