



Appearance Release

Person Appearing: *(please print)* _____

Program Title: _____

Producer(s): _____

I authorize RRCTV and the associated producer to record and edit into programs, series and/or segments and related materials, my name, likeness, image, voice and performance. RRCTV and the producer may use and authorize others to use all parts of the program, including the recordings, for any purpose and dispose of without limitation as RRCTV and the producer shall, in their sole discretion, determine. This authorization is without date and restriction.

Signature of Person Appearing: _____

Address: _____

Date: _____

I represent that I am the parent/guardian of the minor who has signed above. I agree that we both shall be bound by this agreement.

Signature of Parent/Guardian: _____