

# Sample Actor Release Form

I, \_\_\_\_\_, hereby authorize

\_\_\_\_\_ to use my photograph, performances, plays, actions

and appearances in connection with the video production titled: \_\_\_\_\_

\_\_\_\_\_

I grant the right to use all the recordings you make of me and my voice and the right to use my name in connection with this video production. I release the producer from any lawsuits, actions or demands whatsoever in connection with using my likeness and voice in this production.

I certify that I am 18 years of age or older\* and fully understand the meaning and intent of this contract.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Witness: \_\_\_\_\_

*\*If under the age of 18, this form needs to be completed by parent or legal guardian.*