

APPEARANCE RELEASE
(FOR ANY PERSONS APPEARING IN THE PSA WHO ARE NOT AN ENTRANT OR
TEAM MEMBER)

The undersigned hereby grants to Sinclair Communications, LLC d/b/a WRGB-TV (the "Station"), and its affiliated and related entities, licensees, successors and assigns (collectively, the "Station Parties"), for good and valuable consideration, the receipt and adequacy of which are hereby acknowledged, the right to use the video submitted for the "No Text Zone PSA" contest, which includes, or may include, my name, likeness, portrait, recorded voice, recorded image, biographical material and/or written or narrative material (the "Video").

The undersigned hereby grants to the Station Parties all rights of every kind in and to the Video, including without limitation, the right to broadcast, modify, sell, syndicate, license, lease, give or use in any way, in perpetuity and in any and all media, now known or hereafter invented. However, the Station Parties have no obligation to use the Video. The undersigned shall not have any right of action against the Station Parties or any other party arising out of any use of the Video.

I agree to indemnify, release, forever discharge and hold harmless and covenant not to make a claim or sue the Station Parties, and/or the stockholders, directors, officers, employees, agents, representatives, successors, heirs and assigns and each and every person acting through, under or in concert with them, or any of them (hereinafter collectively and individually referred to as "Released Parties") of and from all manner of action or actions, cause or causes of action, at law or in equity, suits, claims, demands, liability, loss, cost or expense, of any nature whatsoever, known or unknown, fixed or contingent which the undersigned may have or hereafter have against Released Parties by reason of any injuries or damages that the undersigned may sustain, whether to my person, property or reputation, as a result of or incident to the Video.

I HAVE READ THIS RELEASE AND AGREE TO ALL OF ITS TERMS:

Signature

Date

Name (please print)*

*If under eighteen (18) years of age, your parent or legal guardian must sign below.

I certify that I am the parent or legal guardian of _____ and on behalf of _____ as well as myself, have read this release and agree to all of its terms.

Parent or guardian signature

Date