TALENT RELEASE CONSENT

OHIO DEPARTMENT OF JOB AND FAMILY SERVICES
OFFICE OF COMMUNICATIONS

I hereby authorize the use and reproduction rights of any or all products including photographs, proofs, audio-visual recordings such as VHS, audio cassette, compact disk, DVD and/or printed products such as billboards, posters, brochures, fliers, and etc., of _____ or his/her likeness for ODJFS on

_____ _____ _____

month day(s) year

Further, I relinquish all rights to said audio, video or print products and acknowledge that I will not be compensated for my participation now or in the future. I am aware that the products will be used for the following: awareness, education, information and promotion of ODJFS programs and services among various interested audiences including radio, television, billboards or other public forums, without reservation or time limitations; and that all materials (footage, sound bites in part or complete, and printed materials) are the sole property of the Ohio Department of Job and Family Services and may not be duplicated, distributed or used without permission from ODJFS.

Title of Project: _____

Date: _____

Client: Ohio Department of Job and Family Services

ODJFS Contact Person: _____

Company/Contractor: _____

Contractor/Company Representative _____
Authorized Signature

Name of Talent: _____ _____
Print **Signature**

Phone Number: _____

Address: _____

City, State, Zip: _____

A parent or guardian must sign to authorize participation by a minor:

Signature of Parent/ Guardian: _____ _____
Print **Signature**

Phone Number: _____

Address: _____

City, State, Zip: _____

Witness: _____ _____
Print **Signature**