

Access Framingham

31 Flagg Drive, Framingham, MA 01702 | Tel. 508-875-5434 | info@accessfram.tv



Public Access Talent Release Form

I, _____ hereby consent,
[Print Name of Person Appearing in Video]

and by this Release grant my permission for _____
[Print Name of Producer]

to record and/or tape my image and voice by means of the videotape and audio recording

made during _____ at _____.
[Print Date of Videotaping] [Print Location of Videotaping]

I understand that the Producer named above working on this videotaping may use said videotape for non-commercial exhibition on Access Framingham's Public Access Channel, on Access Framingham's website, or for any similar exhibition on any non-commercial, Public – Educational - Governmental Access TV Station. By my signature below, or if I am a minor, by the signature of my parent or guardian, I relinquish all rights to any remuneration for this or subsequent uses of the above recordings. It is understood that these recordings may be edited by the Producer named above, for the purpose of such non-commercial telecasts described above, at the discretion of the Producer. I further agree to indemnify and hold harmless the Producer, Framingham Public Access Corporation, the cable companies, the Town of Framingham, their employees and officers or designees from any and all claims or liabilities relating to my appearance at this videotaping and any non-commercial exhibition thereof. I understand that by this Release, the copyright for these recordings belongs to the Producer, and to no one else.

[Signature of Person Appearing in Video]

[Date]

[Print Name of Parent/Guardian if above is a minor]

[Signature of Parent/Guardian]

[Date]

[Street Address]

[Town or City]

[State/Zip Code]

[Home Phone]

[Cell phone or work phone]