

Video Recording Release Form

I, the undersigned, hereby grant Custom Video Productions and _____ permission to record video, make photographs, and record sound, separately or in combination, of me. I also give Custom Video Productions and _____ permission to use the finished video, photography and/or sound recordings in presentations that promote educational, marketing, and instructional or any promotional purposes.

Furthermore, I relinquish and give Custom Video Productions and _____ all rights, title, and financial interest I may have in the finished video, photography, and/or sound recordings including all media, tapes, disks, digital files, negatives, prints, reproductions, and duplicates.

Signature

Name (PRINT)

Date

Role or Job Title

For Minors:

Signature of Parent/Guardian/Witness

Date