Talent Release Form

I, _____ (print name), hereby consent to the photographing of myself and the recording of my voice and the use of these photographs and/or recordings, singularly or with other photographs and/or recordings, for advertising, publicity, or other business purposes. I understand that the term "photograph" as used here includes both still photographs and motion picture footage.

I further consent to the reproduction and use of said photographs and recordings of my voice.

I hereby release NOCTI and any of its associated or affiliated companies, their directors, officers, agents, employees, and customers, and appointed advertising agencies, their directors, officers, agents, and employees from all claims of every kind related to such use.

Talent Signature: _____

Talent Email address (please print clearly): _____

Date: _____

If talent is under 18 years of age:

I, _____(print name), am the parent/legal guardian of the individual named above and I have read this release and approve of its terms.

Parent/Guardian Printed Name: _____

Parent/Guardian Signature: _____

Date: _____

Title of video associated with above: _____

Entrant (Teacher) Name: _____

School and Program: _____

All Talent Release Forms must be sent to NOCTI with the Entry Form and Video.

nocti@nocti.org

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