

Actor Release Form

To Whom It May Concern:

I (the undersigned) hereby grant JAMES STRECKER (the "Producer") the right to photograph me and to record my voice, performances, poses, actions, plays and appearances, and use my picture, photograph, silhouette and other reproductions of my physical likeness in connection with the motion picture titled VIREALITY (the "Picture").

I hereby grant to the Producer, their successors, assigns and licensees the perpetual right to use, as they may desire, all still and motion pictures and sound track recordings and records which you may make of me or of my voice, and the right to use my name or likeness in or in connection with the exhibition, advertising, exploiting and/or publicizing of the picture. I further grant the right to reproduce in any manner whatsoever any recordings including all instrumental, musical, or other sound effects produced by me, in connection with the production and/or post-production of the Picture.

I agree that I will not assert or maintain against the Producer, their successors, assigns and licensees, any claim, action, suit or demand of any kind or nature whatsoever, including but not limited to those grounded upon invasion of privacy, rights of publicity or other civil rights, or for any reason in connection with their authorized use of my physical likeness and sound in the Picture as herein provided.

By my signature here I understand that I will, to the best of my ability, adhere to the schedule agreed to prior to the beginning of my engagement. Additionally, I agree, to the best of my ability, to make myself available should it be necessary, to re-record my voice and/or record voiceovers and otherwise perform any necessary sound work required after the end of filming. Should I not be able to perform such sound work, I understand that the Producer may enter into agreement with another person to re-record my dialogue and/or record voiceovers and use this sound work over my picture or however they deem appropriate.

I further acknowledge and agree that any commitments beyond the scope and intent of this release are the sole responsibility of the above named production, or its duly appointed representative(s) and NOT the Producer.

I hereby certify and represent that I am over 18 years of age and have read the foregoing and fully understand the meaning and effect thereof.

Agreed and Accepted:

Name:

Signature:

Phone:

Date:

Address:

Email:

If Signatory is under 18:

I represent and warrant that I am the parent or guardian of the minor whose name appears above, that I have read and approve of the foregoing Release, and consent to its execution by my child/ward. For good and valuable consideration, the sufficiency and receipt of which is hereby acknowledged, I hereby release the Released Parties as set forth and in accordance with the foregoing Release from any claims and/or causes of action I may have against them of any nature whatsoever, and I hereby fully and unconditionally guarantee my child's/ward's releases, waivers and grant of rights as set forth above.

Name:

Signature:

Address:

Date:

For Producer Use Only:

Producer Name:

Producer Signature:

Producer Phone:

Date:

Producer Email: