

# PHOTO RELEASE FORM

I hereby irrevocably grant IMAGE INTERNATIONAL MANUFACTURING, LLC and its affiliated companies and their respective successors, assigns and licensees (collectively, "IMAGE") permission to use, edit, alter, copy, exhibit, publish and/or distribute my voice, performances, poses, actions, plays and appearances, and my picture, photograph, silhouette and other reproductions of my physical likeness (collectively, "Voice and Likeness") in perpetuity for any lawful purposes determined in IMAGE's sole discretion, including for publications and marketing purposes and web site entries. I waive the right to inspect or approve the use of my Voice and Likeness in any draft or finished product, including written or electronic copy. I understand that Image may elect not to use my Voice and Likeness and that all materials containing my Voice and Likeness are the sole property of IMAGE and will not be returned.

I waive any right to royalties and any other financial compensation and agree to hold harmless and release and forever discharge IMAGE from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have, by reason of this Photo Release Form and arising from or related to the use of my Voice and Likeness by IMAGE.

Unless indicated otherwise below, I am 18 years of age or older and am competent to contract in my own name. I have read this Photo Release Form before signing and agreeing to its terms and I fully understand the contents, meaning, and impact of this Photo Release Form. I agree to indemnify and hold IMAGE harmless for any and all losses, claims, expenses, suits, costs, demands and damages or liabilities on account of personal injury, death, or property damages of any nature whatsoever and by whomsoever made, arising out of or related to the activities in which I am taking part in connection with this Photo Release Form.

---

Signature

---

Date

---

Print Name

---

Phone#

---

Address, including City, State and Zip Code

*If the person signing is under age 18 there must be consent by a parent or guardian, as follows by listing and signing here:*

I hereby certify that I am the parent or guardian of \_\_\_\_\_ (named above), and do hereby give my consent without reservation to the foregoing on behalf of this person.

WPB\_ACTIVE 8483647.2