

Red Carpet Film Festival



3309C 31st Avenue • Vernon, BC • V1T 2H4 • Phone: (250) 545-5705 • Fax: (250) 545-6020

Personal Release

I, _____ do hereby consent and agree that _____, has
(Actor Name) (Producers Name)
the right to take photographs or record video of me (and/or my property) and to use
these in any and all media.

I, _____ hereby consent to and authorize the use of and reproduction by
(Actor Name)
_____ with all rights to exhibit this work in print and electronic form
(Film Title)
publicly or privately. I wave any rights, or claims to the photographs and or video and
agree to any uses for any purpose without further compensation or consideration to
me.

Producer's name: _____

Film title: _____

Signature _____

Date: _____

Address: _____

(If the participant is less than 18 years of age, a parent or guardian must sign below.)

I have read and understood the above foregoing statements.

Name: _____

Signature _____

Date: _____

Address: _____

Red Carpet Youth Film Festival

2704A Hwy 6 • Vernon, BC • V1T 5G5 • Phone: (250) 542-6243 • Fax: (250) 542-6523



Image Reproduction Disclaimer

Name : _____

The Red Carpet Youth Film Festival (RCYFF) would like to help you celebrate your success and promote your films. While RCYFF often advertises our own products and services, we also like to incorporate our participants into our marketing efforts. Your success is our success. To give RCYFF permission to include your photos in our promotional material, please read this form carefully and sign below.

I authorize the Red Carpet Youth Film Festival to:

- Use my likeness or an image of me to promote the event
- Duplicate photos, digital graphics, logos or other images related to me
- Include any or all images and graphics on any printed or electronic material created for RCYFF (e.g. web sites, brochures, posters, handbills, advertisements, flyers, reports, tradeshow booths and in-house displays)

Signature: _____

Date: _____

If under the age of 18, you must have a parent or guardian's signature

Parent of Guardian Signature: _____

Date: _____