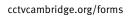
General Release Form





The Producer of the Program should retain this form as proof that they have obtained legal permissions.

Producer		
Phone home	work	cell
E-mail Address		
Program Title		
CCTV Members Working on Pro	gram	
Program Completion Date		
In return for the opportunity to	appear in the above named program:	
record for later transmissions		pove named producer permission to transmit live an evision or in print, my likeness and/or voice for any la program.
	e my name in connection with the same	d otherwise reproduce, modify, and display the sace. I also authorize use of any excerpts of said program
• I waive any right that I may hation therewith, or the use to w		roduct or the written copy that might be used in con
	any liability, loss, claim, cost or damage	CCTV, CCTV's directors and employees (and their sur e of any nature whatsoever which may arise by reaso
	ection, I state that I have read this agre oon me and my heirs, legal representativ	ement before signing and fully understand its cont ves, and assigns.
Name (print)		
Phone	E-mail	
Signature		Date
Is Person over 18?		
Yes		
No: Provide Parent/Guardia	n's Signature	

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