

# Multiple Release Form

cctvcambridge.org/forms



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

► **Producer** \_\_\_\_\_

**Program Title** \_\_\_\_\_

## In return for the opportunity to appear in the above named program:

- I hereby grant to Cambridge Community Television (CCTV) and the above named producer permission to transmit live and/or record for later transmissions, on the Internet, cable or broadcast television or in print, my likeness and/or voice for any lawful purpose, at any time, and to own and register all copyrights of said program.
- I assign to CCTV and the producer the right to re-use, publish, and otherwise reproduce, modify, and display the same, in whole or in part, and to use my name in connection with the same. I also authorize use of any excerpts of said program for the purpose of promoting and publicizing the program.
- I waive any right that I may have to inspect or approve the finished product or the written copy that might be used in conjunction therewith, or the use to which it may be applied.
- I agree to hold harmless the cable provider, the City of Cambridge, CCTV, CCTV's directors and employees (and their successors), and the producer from any liability, loss, claim, cost or damage of any nature whatsoever which may arise by reason of my participation in the above named program.

► **By signing and dating this section**, I state that I have read this agreement before signing and fully understand its contents. This release shall be binding upon me and my heirs, legal representatives, and assigns.

1. **Name (print)** \_\_\_\_\_

**Phone** \_\_\_\_\_ **E-mail** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Is Person over 18?** Yes No: Provide Parent/Guardian's Signature \_\_\_\_\_

2. **Name (print)** \_\_\_\_\_

**Phone** \_\_\_\_\_ **E-mail** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Is Person over 18?** Yes No: Provide Parent/Guardian's Signature \_\_\_\_\_

3. **Name (print)** \_\_\_\_\_

**Phone** \_\_\_\_\_ **E-mail** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Is Person over 18?** Yes No: Provide Parent/Guardian's Signature \_\_\_\_\_

► **Additional Names: Continue on reverse**

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info@cctvcambridge.org  
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Channels 8, 9, & 96

OFFICE USE ONLY

v 2015.05.13

► **By signing and dating this section**, I state that I have read this agreement before signing and fully understand its contents. This release shall be binding upon me and my heirs, legal representatives, and assigns.

4. **Name (print)** \_\_\_\_\_

**Phone** \_\_\_\_\_ **E-mail** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Is Person over 18?** Yes No: Provide Parent/Guardian's Signature \_\_\_\_\_

5. **Name (print)** \_\_\_\_\_

**Phone** \_\_\_\_\_ **E-mail** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Is Person over 18?** Yes No: Provide Parent/Guardian's Signature \_\_\_\_\_

6. **Name (print)** \_\_\_\_\_

**Phone** \_\_\_\_\_ **E-mail** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Is Person over 18?** Yes No: Provide Parent/Guardian's Signature \_\_\_\_\_

7. **Name (print)** \_\_\_\_\_

**Phone** \_\_\_\_\_ **E-mail** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Is Person over 18?** Yes No: Provide Parent/Guardian's Signature \_\_\_\_\_

8. **Name (print)** \_\_\_\_\_

**Phone** \_\_\_\_\_ **E-mail** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Is Person over 18?** Yes No: Provide Parent/Guardian's Signature \_\_\_\_\_

9. **Name (print)** \_\_\_\_\_

**Phone** \_\_\_\_\_ **E-mail** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Is Person over 18?** Yes No: Provide Parent/Guardian's Signature \_\_\_\_\_

10. **Name (print)** \_\_\_\_\_

**Phone** \_\_\_\_\_ **E-mail** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Is Person over 18?** Yes No: Provide Parent/Guardian's Signature \_\_\_\_\_