

## Personal Release Form

I \_\_\_\_\_, agree to participate in the production of Hope Channel Inter-America and its affiliated media centers for global broadcast.

I agree that my appearance on *Hope Channel Inter-America* is given free and without compensation. I agree that the right to this taping will belong solely and exclusively to *Hope Channel Inter-America* for any purpose it deems appropriate.

I understand that *Hope Channel Inter-America* is not obligated to use any of the rights granted. I know that *Hope Channel Inter-America* will incur expenses in reliance on this release, so I will not revoke it.

I represent and warrant that I have the full right, power and authority to grant the rights herein granted.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address

If Model is under 18: I, \_\_\_\_\_, am the parent/legal guardian of \_\_\_\_\_, I have read this release and approve of its terms.