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## Appearance Release Form

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Program Title (Working Title): (the "Program")

Producer/Production Entity: (the "Producer")

Participant's Name:

Parent or Guardian Name (if a Minor)

Preferred Contact Details:

**Unstoppable™**

**Offworld Pictures**

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I, the Participant, hereby authorise the Producer to record and edit into the Program and related materials my name, likeness, image, voice and participation in and performance on film, tape or otherwise for use in the above Program or parts thereof (the "Recordings").

I agree that the Program may be edited and otherwise altered at the sole discretion of the Producer and used in whole or in part for any and all broadcasting, non-broadcasting, audio/visual, and/or exhibition purposes in any manner or media, in perpetuity, throughout the world.

The Producer may use and authorize others to use all or parts of the Recordings. The Producer, its successors and assigns shall own all rights, title and interest, including copyright, in and to the Program, including the Recordings, to be used and disposed of without limitation as Producer shall in its sole discretion determine.

I represent, in my own right or as parent or guardian of the Participant, if a minor, that we shall both be bound by the terms of this Appearance Release.

Participant's Signature:

Parent or Guardian Signature (if a Minor)

Signature Date:

Address:

