

## **Appearance Release**

Interview/Photograph Date:	Location:
Project:	
Participant's Name:	
above ("Project"), I hereby authorize Secondarica and news media to record my non film, tape or otherwise ("Material"). desired and used in whole or in part in known or hereafter devised, for any disperpetuity. I understand and agree that any other materials at Second Harvest H	luding my appearance in the project specified cond Harvest Heartland, its partners, Feeding ame, likeness, image, voice and performance I agree that the materials may be edited as n any form, format, manner or media, now istribution purpose, throughout the world in the Materials may be used in the Project or in leartland's sole discretion. I understand that I and any other products or benefits derived
participation and the rights I have grant violate any commitment or understanding	enter into this Agreement and that my sed in this Agreement will not conflict with or ng I have with any other person or entity. I and from any and all claims arising out of the
I am over 18 years of age.	
Signature:	Date:
Print Name:	
Street Address:	
City, State, Zip:	Phone: