



second harvest
HEARTLAND

Appearance Release

Interview/Photograph Date: _____ Location: _____

Project: _____

Child's Name (Please Print): _____

For good and valuable consideration, including my appearance in the project specified above ("Project"), I hereby authorize Second Harvest Heartland, its partners, Feeding America, and news media to record my name, likeness, image, voice and performance on film, tape or otherwise ("Material"). I agree that the materials may be edited as desired and used in whole or in part in any form, format, manner or media, now known or hereafter devised, for any distribution purpose, throughout the world in perpetuity. I understand and agree that the Materials may be used in the Project or in any other materials at Second Harvest Heartland's sole discretion. I understand that I have no rights to the Project, Materials and any other products or benefits derived therefrom.

I represent that I have the right to enter into this Agreement and that my participation and the rights I have granted in this Agreement will not conflict with or violate any commitment or understanding I have with any other person or entity. I expressly release Second Harvest Heartland from any and all claims arising out of the use of the Materials.

Parental permission must be granted for children under 18.

Parent's Signature: _____ Date: _____

Print Name: _____

Street Address: _____

City, State, Zip: _____ Phone: _____