



Video and Photo Release Form for the Counterterrorism Education Learning Lab® (CELL®)

I, the undersigned, authorize the Counterterrorism Education Learning Lab® (CELL®) to utilize images and footage of myself and any and all materials related to the production of, and included in, the final product of the Community Awareness Program® (CAP®) and/or the program video, "Recognizing the Signs." I release all claims against the CELL with respect to the copyright, publication or use (as herein limited) of such video footage or images, including any claim for compensation related to their use.

I hereby authorize the CELL to record and edit into the program video and related materials my name, likeness, image, voice and participation in and performance on film, tape or otherwise for use in the above program video or parts thereof (the "Recordings"). I agree that the program video may be edited and otherwise altered at the sole discretion of the CELL 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 CELL may use and authorize others to use all or parts of the Recordings. The CELL, its successors and assigns shall own all right, title and interest, including copyright, in and to the video including the Recordings, to be used and disposed of without limitation as the CELL shall in its sole discretion determine.

PERSONAL APPEARANCE RELEASE form template

Production Date(s): _____

Program Title (working title): _____ Recognizing the Signs ("The Program") _____

Participant's Name: _____

Producer/Production Entity: Counterterrorism Education Learning Lab (CELL) ("Producer")

Production Location: _____

Signature of Person Appearing: _____

Address: _____ City, State, Zip: _____

Date: _____ Phone: _____