

OKLAHOMA VETERANS FILM COMPETITION

RELEASE FORM

Release forms may be handwritten. Illegible forms will not be accepted.

I hereby irrevocably consent to the use and reproduction (electronically, digitally, audio or print) of any and all photographs provided to filmmakers along with any recordings of any form whatsoever for creative use in the OKLAHOMA VETERANS FILMS COMPETITION and public display.

I also consent to any printed and audio recordings used in conjunction with the photograph(s) and video recordings along with the use of my name.

I hereby release OKLAHOMA VETERANS FILMS COMPETITION, and its affiliates, from any and all liability against any false statements, including those implicated or misstated, which are provided to filmmakers for their creative use.

I have read this document and have a clear understanding and am fully aware of the content of its implications, legal and otherwise.

Name:		
Signature:		
Date:		
Address:		
City:	State:	Zip:
Parental Verification - Signature of Pa (If person is under 18 years of age.)	arent or Guardian	
Signature:		
Date:		