



TALENT RELEASE FORM

Name of Producer _____

Title of Program _____

I hereby assign, without compensation, all rights and release from liability the above producer and the Sacramento Community Cable Foundation (doing business as Access Sacramento) for the recording, reproduction, exhibition, cable casting, over-air broadcast, internet streaming and distribution of my visual image and/or voice for non-profit use.

TALENT'S NAME (Please Print): _____

TALENT'S SIGNATURE: _____

DATE: _____ Phone () _____

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