



### **RELEASE FORM**

For good and valuable consideration, the receipt of which is hereby acknowledged, I hereby consent to the photographing of myself and the recording of my voice and the use of these photographs and/or recordings singularly or in conjunction with other photographs and/or recordings for advertising, publicity, commercial or other business purposes. I understand that the term "photograph" as used herein encompasses both still photographs and motion picture footage.

I further consent to the reproduction and/or authorization by the Vancouver Dispensary Society to reproduce and use said photographs and recordings of my voice, for use in all domestic and foreign markets. Further, I understand that others, with or without the consent of the Vancouver Dispensary Society may use and/or reproduce such photographs and recordings.

I hereby release the Vancouver Dispensary Society, and any of its associated or affiliated companies, their directors, officers, agents, employees and customers, and appointed advertising agencies, their directors, officers, agents and employees from all claims of every kind on account of such use.

I agree that I shall receive no compensation or payment whatsoever with respect to the Production.

I acknowledge that I am not a member of ACTRA or any other similar union or guild. This release shall be governed by the laws of the province of British Columbia and the country of Canada.

Print Name: \_\_\_\_\_

Witness:

Signature: \_\_\_\_\_

Signature:

Date: \_\_\_\_\_

Date: