



## TALENT RELEASE FORM

I authorize Element Federal Credit Union to make use of my appearance in the “2020 In My Element Scholarship.”

I understand that I am to receive no compensation for this appearance. Element FCU shall have complete ownership of the program and images. I give Element FCU the right to use my name, likeness and biographical material to publicize the program and the services.

Element FCU may:

1. Photograph me and record my voice and likeness for the purpose of the production mentioned above, whether by film, videotape, magnetic tape, digitally or otherwise;
2. Make copies of the photographs and recordings so made;
3. Use my name and likeness for the purposes of education, promotion or advertising of the sale or trading in the photographs, recordings and any copies so made.

I further understand the master tape remains the property of Element FCU and that there will be no restrictions on the number of times that my name and likeness may be used.

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

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

\_\_\_\_\_  
Talent Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent or Guardian Signature (if under 18 years of age)

\_\_\_\_\_  
Date