

ACTOR RELEASE

I (the undersigned) do hereby confirm the consent heretofore given you with respect to your photographing me in connection with your motion picture/video: Title Production Number _____ and I hereby grant to you, your successors, assigns and licensees the perpetual right to use, as you may desire, all video, still and motion pictures and sound track recordings and records which you may make of me or of my voice, and the right to use my name or likeness in or in connection with the exhibition, advertising, exploitation or any other use of such motion picture or recording. I also understand that it takes a significant amount of time to complete a film – and in some cases student films are abandoned and not completed at all. If the student filmmaker has promised a tape of the film I agree to allow a reasonable amount of time to elapse after the performance for completion (i.e. six months). I am over eighteen years of age I am a member of the Screen Actor's Guild Signature Name (print) Address Phone Number Character Name ____ Student Filmmaker Phone

SFTV Class _____ Date _____

PLEASE SEE ATTACHED ADDENDUM A



ADDENDUM A

LMU CAST/CREW and COMMUNITY AGREEMENT

- SFTV sets must be work places free of discrimination of all types and of abusive, offensive or harassing behavior.
- SFTV has a SAFETY HOTLINE: (310) 258-2686 where you or any cast/crew member have the responsibility to report behavior or instances that may be deemed unsafe, violate our policies for Production or do not hold to this tenet.

ALWAYS

- honor your commitment to work all agreed upon days
- arrive on time and ready to work
- work as directed until "wrap" is called or 12 work hours have elapsed.
- Stay updated on the Call Sheet instructions.

EVERYONE MUST:

Adhere to the LMU SFTV Production procedures