



**TALENT RELEASE PERMISSION FORM**

I, the undersigned (“the Participant”):

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I further waive any right of approval or inspection with respect to use of the Materials and hereby release and discharge University of Wisconsin–Madison, or its assigns, from any future claims or liabilities.

I further waive any right to compensation for my appearance in the Materials.

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

Print name: \_\_\_\_\_

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

**If Participant is a minor:**

I represent that I am a parent or guardian of the minor who has signed the above release and I hereby agree that we shall both be bound by this release.

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

Print name: \_\_\_\_\_

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

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Witnessed by: \_\_\_\_\_

Date: \_\_\_\_\_ Print name: \_\_\_\_\_