

AUDIO/VIDEO RELEASE FORM

I, _____ (print name), understand that by signing this release form, I hereby grant my permission to *Conglom Entertainment* to videotape and photograph me, and record my voice, conversation and sounds during and in connection with sharing my video submitted for the *On the Come Up Music Showcase*.

I hereby grant all rights to The *Conglom Entertainment* to use the results of such videotaping, photography and recording in perpetuity, throughout the world, to reproduce, distribute, and use, in any manner and for any purpose, all or any portion thereof, including but not limited to communication materials promoting *Conglom Entertainment OTCU Music Showcase*.

Furthermore, I understand that the communication materials may be distributed to various target audience populations and via various distribution channels.

I understand that once this information is printed, recorded and/or electronically posted, *Conglom Entertainment* retains no further control over its use.

I waive any right to review or approve any finished communication materials that may use my information.

I acknowledge that *Conglom Entertainment* will rely on this permission and hereby agree not to assert any claim of any nature whatsoever against anyone relating to the exercise of the permissions granted here under.

I acknowledge and agree that this agreement is binding on all of my heirs and assigns.

I also agree that this agreement is governed by the laws of the State of Texas, without regard to any conflicts of law provisions.

I confirm that I am 18 years of age or older and understand that by signing this form my information may no longer be protected by privacy rules or other confidentiality measures.

I have been offered the opportunity to ask questions, or have this form read to me.

I understand that I may revoke this authorization, in writing.

Any revocation will not apply to information that has already been released, printed, recorded and/or electronically posted.

Participant Signature _____ **Date** _____

Guardian Signature _____ **Date** _____
(If video participant is under the age of 18)