

## Talent Release Form

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I further release Freestyle Foundation, SafeLaunch, their assigns, agents or licensees from any liability for what I might deem misrepresentation of me by virtue of editing, alterations, optical illusion or faulty mechanical reproduction.

I am over eighteen years of age and have read the above authorization and release prior to its execution (If under eighteen, parent's signature is required).

Name

\_\_\_\_\_

Address

\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_

Date of Birth \_\_\_\_\_

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

On behalf of my child, named above, I hereby confirm and ratify this Talent Release Form.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_