



Student Appearance Release Form

I, _____, hereby release my
(Student Name)
image, likeness, and the sound of my voice, as recorded for use in a student film
or photography project at FilmNorth associated with the FilmNorth class I am
attending. I agree that the footage may be used in whole or in part on FilmNorth's
website and social media platforms to promote FilmNorth's Youth Programs.
I also hereby give my consent for FilmNorth to use my photograph and likeness in
its publications, including its website, electronic newsletter, and social media
platforms, to promote FilmNorth's Youth Programs. I expressly release FilmNorth
and associated filmmakers, your agents or representatives, or any such institution
transmitting or exhibiting the program, from any claims arising from such use or
distribution.

(Student Signature)

(Date)

(Parent or Guardian Signature - required
for students under age 18)

(Date)