

WAIVER/RELEASE FORM
VOICE AUDITION TERMINAL PAGING ANNOUNCEMENTS

I hereby grant full rights and permission to Metropolitan Airports Commission for any film, videotape, and/or audio recording of my image and voice and information provided by me during the voice audition for public relations, radio, television, and/or print advertising purposes.

I hereby release and discharge Metropolitan Airports Commission and their officers, directors, employees, agents and assigns from any and all claims and demands arising out of or in connection with the use of the materials listed, including and without limitation any and all claims for libel or invasion or privacy.

Participant Name: _____

Birthday Date: _____ Email: _____

Address: _____

City/State/Zip: _____

Phone: _____

Please list your place of employment at MSP: _____

I am the person whose name appears above. I have read the forgoing and fully understand its contents. This release shall be binding upon me and my legal representatives, heirs and assigns.

**Voice auditions will take place on Wednesday, August 14th
between 10:00 am – 3:00 pm in Room C-3460**

Will your manager allow you to participate in production while you're "on the clock?" Manager/Supervisor approval is required. Please check one.

- Yes
- No

Please check the appropriate box below:

- I certify that I am not represented by any talent agency or agency.
- I certify that while I am represented by a talent agent or agency for other work, this project is outside the scope of my agent or agency and I have agreed to do this as an independent contractor.