



WALLACE  
COMMUNITY  
COLLEGE

## PERFORMER RELEASE

My signature below attests that I, \_\_\_\_\_ ,

have read this release and understand and agree to the following:

1. I permit recording of my voice and likeness to be made in connection with a media project currently titled \_\_\_\_\_ .
2. I authorize Wallace Community College, the proprietor of this project, in perpetuity, to process, store, reproduce, distribute, and display recordings of my voice and likeness made in connection with this project, in whatever ways, forms, and media, and by whatever methods and technologies they may choose.
3. I waive, in perpetuity, the rights to any and all compensation for these recordings, other than such rights as may be set forth in other written agreements between myself and the proprietor of this project.

\_\_\_\_\_  
Performer signature

\_\_\_\_\_  
Witness signature

\_\_\_\_\_  
Performer printed name

\_\_\_\_\_  
Witness printed name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date