



**PARTICIPATION AGREEMENT AND RELEASE FORM**

In consideration of my participation in the Monroe Public Access Cable Television program titled \_\_\_\_\_.

I hereby grant my continuing consent to photographing, recording or the reproduction in any manner of my likeness, voice and activities including the use of video tapes and audio tapes.

I further authorize MPACT, its agents and assignees to make unlimited use of such reproductions including without limitation cable casting to the public the reproductions of MPACT's participating cable systems.

I understand that I will not receive any financial compensation for my participation in the cable television program.

The producer of this program may use my name, my likeness and my biography for publicizing this program.

I hereby indemnify and hold harmless MPACT, the producer, any person, firm or corporation connected with the program from and against any claims, liabilities cost and expenses arising or any materials furnished by me for the program.

This continuing Agreement was signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

**\*\* FOR ALL CABLECASTS IN WHICH I APPEAR AFTER THE ABOVE DATE \*\***

- |                              |                          |
|------------------------------|--------------------------|
| 1. _____<br>PRINT LEGAL NAME | _____<br>SIGN LEGAL NAME |
| 2. _____<br>PRINT LEGAL NAME | _____<br>SIGN LEGAL NAME |
| 3. _____<br>PRINT LEGAL NAME | _____<br>SIGN LEGAL NAME |
| 4. _____<br>PRINT LEGAL NAME | _____<br>SIGN LEGAL NAME |
| 5. _____<br>PRINT LEGAL NAME | _____<br>SIGN LEGAL NAME |

**Monroe Public Access Cable Television, Inc.**  
20 W. Fifth Street, Suite 103  
Monroe, Michigan 48161 734-243-5707