

**KPAT SHORT-SHORTS 2019**

**INDIVIDUAL RELEASE FORM**

(PLEASE USE CAPITAL LETTERS)



**FILMMAKER OR FILM MAKING TEAM (THE FILMMAKER):**

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**INDIVIDUAL RELEASE FORM**

I agree to permit the Filmmaker named above, to record me, my voice and if applicable my musical performance or photographic, video and /or audio recording media, to be included in a film to be entered in the KPAT Short Shorts 2019 Film Competition.

If I attend the KPAT Short-Shorts 2019 film premiere and prize-giving ceremony, I agree to permit Kaipatiki Arts Trust (KPAT) to record me on photographic, video and/or audio recording media.

If the film is a winning film, I give the Filmmaker named above and KPAT the unlimited right to use my name and all and any part of the recordings as they may be edited by or on behalf of the Filmmaker and KPAT, at its discretion, for showing in or in relation to the KPAT Short-Shorts Competition and/ or the film throughout the world on television, the internet, on DVD and in /on any present or future media including in advertising and publicity of both the KPAT Short Shorts 2019 and the film or any part of them, or any derivative of them.

I accept that the Filmmaker's use of this material will not invade my privacy.

Signed: ----- Date: -----

Name: -----

Address: -----

Phone: - ----- Email: -----

PARENT/ LEGAL GUARDIAN/ CAREGIVER (CIRCLE AS APPROPRIATE)  
TO SIGN IF INDIVIDUAL IS UNDER 18 YEARS OF AGE:

Signed: ----- Date: -----

Name: -----Ph.-----