

MODEL RELEASE FORM



For good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, I, the undersigned, agree as follows:

1. I agree, beginning on the date signed below and hereafter, to be photographed, recorded and/or videotaped by Viktorija De'Ann Cosmeceuticals and its agents ("Company").
2. I hereby irrevocably authorize Company and its affiliates to copyright, publish, reproduce, exhibit, transmit, broadcast, televise, digitize, display, use in any way on social media, otherwise use, and permit others to use, (a) my name, image, likeness, and voice, and (b) all photographs, recordings, videotapes, audiovisual materials, writings, statements, and quotations of or by myself (collectively, the "Materials"), in any manner, form, or format whatsoever now or hereinafter created, including on the Internet, and for any purpose, including, but not limited to, advertising or promotion of Company, its affiliates, or their services, without further consent from or payment to me.
3. It is understood that all of the Materials, and all films, audiotapes, videotapes, reproductions, media, plates, negatives, photocopies, and electronic and digital copies of the Materials, are the sole property of Company. I agree not to contest the rights or authority granted to Company hereunder. I hereby forever release and discharge Company, its employees, licensees, agents, successors, and assigns from any claims, actions, damages, liabilities, costs, or demands whatsoever arising by reason of defamation, invasion of privacy, right of publicity, copyright infringement, or any other personal or property rights from or related to any use of the Materials. I understand that Company is under no obligation to use the Materials.
4. This document contains the entire agreement between the Company and the undersigned concerning the subject matter hereof.

Model Info

Company Representative Info

Printed Name: _____

Printed Name: _____

Model Signature: _____

Company Signature: _____

Guardian Signature: _____

Date: _____

Date: _____

Minor Name: _____

(Note: If participant is a minor, please secure the name and signature of the participant's parent or legal guardian)