

## Model Release Form

I do hereby grant permission to The Scoop on Pilates, its agents, and others working under its authority, full and free use of video/photographs containing my image/likeness. I understand these images may be used for promotional, news, advertising, educational and/or other business related purposes. For valuable consideration received, you hereby irrevocably grant to The Scoop on Pilates perpetually, exclusively, and for all media throughout the world (including print, non-theatrical, home video, CD-ROM, internet and any other electronic medium presently in existence or invented in the future), the right to use and incorporate (alone or together with other materials), in whole or in part, photographs or video footage taken of you as a result of your participation in activities of the Scoop on Pilates.

Additionally, I waive all my right, title and interest in and to all negatives, prints, tapes, and reproductions thereof, and I do hereby release the aforesaid parties and their successors and assigns, is any and all rights, claims, demands, actions or suits from which I may or can have against them on account of the use or publication of said photographs and/or motion pictures or tapes.

I do further certify that I am either of legal age, or possess full legal capacity to execute the foregoing authorization and release.

Name (please print)\_\_\_\_\_

Signature\_\_\_\_\_ Date\_\_\_\_\_

Witness Signature\_\_\_\_\_ Date\_\_\_\_\_

Guardians Name \_\_\_\_\_ Date\_\_\_\_\_

**Instructions - Fax to: 724-873-0830**

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