

500 Lafayette Road  
St. Paul, MN 55155-4040  
651-296-6157, 888-646-6367 or  
through the Minnesota Relay Service at 711  
or 800-627-3529

Green Hall 201A and C  
1530 Cleveland Avenue North  
St. Paul, MN 55108  
651-603-6761

### Talent Release Form

I give permission and rights to the State of Minnesota, the Department of Natural Resources (DNR), and the Minnesota Forest Resources Council (MFRC) to record my performance and to use images of me, my performance and my sounds. I understand that this use includes the rights to reproduce, publish, publicly display, distribute, license, and assign any such recordings. I understand that the State of Minnesota, the DNR, and the MFRC holds the copyright to these recorded images and sounds in all formats. I further understand that I hold no intellectual property rights on the images and recordings

- I authorize my name to be used in connection with all uses of these recorded images and sounds.
- I understand that I will not be paid for any of the uses of these recorded images and sounds.
- I waive all rights to inspect, approve or control how these recorded images and sounds will be used by the State of Minnesota, the DNR, and the MFRC.
- I understand that the State of Minnesota, the DNR, and the MFRC will not intentionally distort or misrepresent these images and recordings.
- I agree to not sue and to hold harmless the State of Minnesota and its officials, employees, contractors and licensees from any claims or damages arising from use of these recorded images and sounds of me and my performance.
- I am over 18 years old and have the right to contract in my own name. I HAVE READ THIS DOCUMENT AND I UNDERSTAND ITS CONTENTS. (If the recorded images, performance and sounds are of a minor, I am the legal guardian signing on behalf of the minor.)

**Complete if subject is a minor:**

----- (signature) (date)	----- (signature of legal guardian) (date)
----- (print name)	----- (print name)
----- (title, if applicable)	----- (relationship to minor)
----- (organization, if applicable)	----- (organization, if applicable)
----- (address)	----- (address)
----- (city, state, zip code)	----- (city, state, zip code)
----- (telephone number)	----- (telephone number)