



Add reference of the Model

By signing this release, I provide the Artist with an irrevocable grant, allowing them to license and use the Content in any manner for any purpose except for illegal uses. This may include but is not limited to art, advertising, promotional activities, marketing campaigns, and packaging for various products or services.

I waive any further entitlement to additional consideration and agree not to make any claims related to the Content against the Artist for any reason.

I consent to the restriction of my personal information from being publicly disclosed. However, I acknowledge that it may be used solely for licensing the Content when required, such as for defending claims and protecting legal rights. This information may be retained for as long as necessary to fulfill these purposes, including sharing it with sub-licensees and assignees of the Artist, and transferring it to countries with varying data protection and privacy laws, where it may be stored, accessed, and utilized.

I hereby release, discharge, and accept to hold harmless the Artist, the Artist's heirs, legal representatives and assigns, and all persons acting under the Artist's authority or those for whom he/she is acting, from any liability by virtue of any use of the Content or any changes or alterations made thereto, including from claims for defamation or invasion of privacy or publicity. I acknowledge that the Artist is not responsible or liable for any unauthorized use or piracy of the Content.

I affirm and guarantee that I am at least 18 years old and possess the legal capacity to sign this release either for myself or on behalf of a minor as their parent or legal guardian. I understand and consent that this release remains enforceable upon my heirs and assigns.

**Witness**

**I confirm that I personally witnessed the Model signing this Release.**

Name :

Signature :

Date :

**Model / Parent Information**

Full Name :

Gender :

Date of Birth:

Email :

Phone :

Address:

Country :  City :

Signature :  Date :

**Artist Information**

Full Name :

Email :

Phone :

Address:

Country :  City :

Signature :  Date :