

LOCATION RELEASE

Company Name:

(the «Producer»)

Address:

Include email address

WORKING TITLE OF PRODUCTION	
NAME OF PRODUCER	DATE OF SHOOT
DESCRIPTION OF THE PRODUCTION	
LOCATION OF SHOOT (indicate full civic address and description of premises)	FULL ADDRESS OF THE AUTHORIZED REPRESENTATIVE
FULL NAME OF THE AUTHORIZED REPRESENTATIVE (block letters)	TELEPHONE NUMBER

I have the right to enter into this agreement and to grant to the Producer the rights conveyed hereunder. I hereby grant to the Producer and/or its assigns, its representatives and employees access to the shooting location in order to shoot this Production and any resulting cinematographic work, any related website and/or any DVD special feature supplement during the date specified above. I authorize that the Producer and/or its assigns to represent and identify the shooting location in the Production, to photograph, record and film the location, in whole or in part, as a real or fictitious location and to bring on the premises the equipment required for the shoot.

If, owing to production requirements, the Producer and/or its assigns have to change the date of the shoot or redo the shoot, I agree to grant another authorization for a subsequent shooting date under the same conditions.

In consideration of the above, the Producer and/or its assigns undertake to take all due care of the location premises during the date of the shoot and to return them to their original condition, other than for normal wear and tear, at the end of the shoot. The Producer and/or its assigns undertake to indemnify me for damages caused through the fault of the Producer, and/or its assigns, its representatives or employees during the date of the shoot.

I hereby release the Producer and its assigns and licensees, from and against any and all claims, liabilities, demands, actions, causes of action(s), costs and expenses whatsoever, at law or in equity, arising out of the Producer's use of the location as herein provided.

I agree that the Producer is under no obligation to exercise any of the rights or licence granted herein.

EXTRA NOTES

I have read the foregoing and fully understand the meaning and effect thereof and I have signed this release.

SIGNATURE OF THE AUTHORIZED REPRESENTATIVE

SIGNATURE OF THE PRODUCER'S REPRESENTATIVE

DATE

DATE

PORTION TO BE COMPLETED AT THE END OF THE SHOOT

I declare that I have inspected the location specified above and am satisfied with its condition. I hereby release and forever discharge the Producer, and/or any assignee, its representatives and employees from any claims, demands or causes of action which I could have on any grounds or in any capacity whatsoever in connection with the shooting of the above Production.

SIGNATURE OF THE AUTHORIZED REPRESENTATIVE

DATE