



Audience/Group Release Form

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For my participation in the videotaping or live programming by Community Media Network (CMN), I give my permission to reuse and/or cablecast any of my appearances on such videotapings or live programming events.

I further agree to release, discharge and indemnify CMN, including its representatives or designees, from any legal proceedings which may arise in relation to the conditions stated above.

Appearances by:			
	Name	Address	Phone
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