

# Documentary Release Form: A Positive Experience

**www.APositiveExperience.com**

A Positive Experience Production

Producers: Ronnie Larsen, Craig Fox and Caryn Horwitz

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Name of Contributor: \_\_\_\_\_

Phone Number of Contributor: \_\_\_\_\_

Address of Contributor: \_\_\_\_\_

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E-Mail of Contributor: \_\_\_\_\_

Date: \_\_\_\_\_

## **A Positive Experience (working title)**

I, \_\_\_\_\_, agree to the inclusion of my contribution in this documentary, the nature of which has been explained to me. I understand that my contribution will be edited and there is no guarantee that my contribution will appear in the final film.

I agree that my contribution may be used to publicise the documentary. I have agreed to accept **no money** for the use of my contribution.

I understand that this documentary (or any part of it) may be distributed in **any medium in any part of the world** including the internet.

My contribution has been and will be, to the best of my knowledge, truthful and honest. I have not deliberately sought to conceal any relevant facts from the makers of this film.

Signed name of contributor: \_\_\_\_\_

Print name of contributor: \_\_\_\_\_