**CAST RELEASE FORM**

|  |  |
| --- | --- |
| Date |  |
| Actor Name |  |
| Mobile Number |  |
| Nationality |  |
| UAE ID or Passport # |  |
| Agent |  |
| Client Name |  |
| Project Title |  |
| Date of Shooting |  |
| Usage Period |  |
| Usage Countries |  |
| Usage Media |  |

I hereby confirm that I have read, understood and accepted the terms and conditions provided by WHAT IF Creative Studio FZ LLC with regards to taking on an assignment.

I hereby authorize WHAT IF Creative Studio FZ LLC and their clients to use film or photographs containing my likeness for the use of the above description.

I hereby declare that I am not bound by any competing clause refraining me from working as an actor for or preventing me from featuring in any advertising campaign promoting Products or Services of the Project as stated above.

I understand that the compensation to be received will be payment in full for the services rendered and rights granted herein, and I will not receive further compensation in connection with this production.

I hereby waive any right to review the use of my likeness.

I accept that it’s hard, if not impossible, to remove from social media or other electronic media and that WHAT IF Creative Studio FZ LLC or third parties may keep the product in social media or other unpaid electronic media as history records after the term of this Release Form. Such an event does not constitute a breach of this agreement.

Models Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(As appears in passport)

Models Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(As appears in passport)

\* Signature of parent/guardian required for anyone less than 21 years of age.