



MCSPronto.com

STREAMING PLATFORM

MCS COMEDY EXPLOSION

SEAT FILLER RELEASE FORM

For Guest Audience Members / Seat Fillers



Thank you for joining us as a valued member of our live studio audience! By completing and signing this form, you acknowledge and agree to the terms below, granting Michael Coleman Studios Network (MCS Network) the right to use your visual image and related content as described herein.

GUEST INFORMATION (PLEASE PRINT)

Full Name: _____ Date of Birth: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

PRODUCTION INFORMATION

Production Title: _____ (MCS Comedy Explosion)

Recording Date: _____ Location: _____

PAYMENT INFORMATION

As a valued seat filler/guest audience member, you will receive **\$15 per hour** for a 2 hour taping.

Payment will be issued in the form of a check from MCS Association Casting and mailed to the address provided above.

Payment is processed 14 to 21 days after the release of the live show taping.

RELEASE AND CONSENT

I hereby grant Michael Coleman Studios Network, its affiliates, assigns, licensees, and representatives (collectively "MCS Network") the irrevocable, perpetual, worldwide right and permission to film, photograph, audio record, and/or otherwise capture my image, likeness, voice, and all other aspects of my appearance (collectively "My Image") during my attendance as a guest audience member/seat filler for the above-referenced production.

I further grant MCS Network the unrestricted right to use, reuse, edit, reproduce, distribute, publicly perform, display, and create derivative works of My Image in whole or in part, in any and all media now known or hereafter devised, for any lawful purpose, including but not limited to promotional, advertising, marketing, broadcast, streaming, internet, social media, and archival uses, in connection with the MCSPronto.com streaming platform and all related channels, shows, and distribution outlets.

I understand that I will not receive any compensation or payment for my participation other than the payment described above.

I hereby release and hold harmless Michael Coleman Studios Network, its officers, employees, agents, and representatives from any and all claims, demands, liabilities, or causes of action that I may have now or in the future arising out of or related to the capture and use of My Image.

I have read this release, understand it, and agree to be bound by its terms.

Signature: _____ Date: _____

Printed Name: _____



PLEASE NOTE:

By signing this form, you acknowledge that you are attending as a volunteer audience member/seat filler and the payment details stated above.

Thank you for being part of the MCS Comedy Explosion experience!



MICHAEL
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STUDIOS
NETWORK

STREAMING ENTERTAINMENT. REAL TALENT. REAL LAUGHS.

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