

Minor Talent Release Form

For minors appearing on camera — signed by a parent or legal guardian.

Producer: RetroMotion Creative LLC

Client:

Project Title:

Shoot Date:

Minor's Name:

Parent / Legal Guardian Name:

Emergency Contact:

GRANT OF RIGHTS

I, the undersigned parent or legal guardian, grant RetroMotion Creative LLC and its clients permission to record the minor named above — their image, voice, likeness, and participation — in connection with the above-referenced video production. I grant permission to use this footage in marketing, advertising, websites, social media, broadcast, internal communications, and client deliverables. I confirm that I am the parent or legal guardian of the minor named above.

Authorized Signature Block

Parent/Guardian Signature:

Date:

Print Name: