



**Performance Release**

In consideration of my appearing on the program:

\_\_\_\_\_ *Title or Subject* \_\_\_\_\_ *Date*

And for no subsequent remunerations, I do hereby on behalf of myself, my heirs, executors, administrators and assigns, authorize the Center for Successful Aging at California State University, Fullerton to use live recorded on tape, film or otherwise my name, voice performance, physical performance, or written material therein for television cable systems, CD-ROM development, and college classrooms for audiovisual and general education purposes in perpetuity.

I further agree on behalf of myself and others as above stated, that the Center for Successful Aging at California State University, Fullerton may also use my name, likeness, and biography for publishing and promoting broadcasts and other uses.

I warrant and represent that all material furnished and used by me on any such programs is my own original material that I have full authority to use for such purposes. Further, I agree to indemnify, defend and hold the Center for Successful Aging at California State University, Fullerton harmless for any and all claims, suits, or liabilities arising from my appearance and the use of any of my materials, name likeness, or biography.

Conditions:

Witness: \_\_\_\_\_

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

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

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

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