

Livestream Guest Release Form

Guest Information

Full Name

Email Address

Phone Number

Event Details

Livestream Title

Date of Appearance

Guest Release

I acknowledge and agree to participate in the above Livestream event. I grant permission to record, use, and distribute my image, voice, and statements for promotional, commercial, and/or educational purposes without compensation. I release the organizers and affiliates from all claims arising out of the use of such recordings.

Signature

Date