

Testimonial Ad Release and Approval Document

Advertiser/Company Name:

Contact Person:

Contact Email:

Contact Phone:

Testimonial Details

Testimonial Provider Name:

Role/Relationship:

Testimonial Text:

Intended Use (Media, Duration, etc.):

Terms and Conditions

Approval and Release

I hereby give approval for the use of my testimonial as described above.

Testimonial Provider Signature:

Date:

Advertiser/Company Representative Signature:

Date:
