

# D. Knight Designs

## Model Release Form v.08.1

In consideration of the service to be performed without cost to me by D. Knight Designs, I do hereby release and forever discharge D. Knight Designs, and each of its respective agents, directors, officers, employees, representatives, and all persons acting on their behalf (hereinafter collectively referred to as D. Knight Designs), from all claims, demands, causes of action or liability (hereinafter "Claims") that may arise from any and all injuries I may incur as a result of the services performed and/or material used in connection with the application of cosmetic products furnished to me or applied to my skin, hair, nails, or other portions of my body by D. Knight Designs.

I represent that I have no history or occurrences of adverse skin reaction relating to the use of cosmetic products.

I realize in executing this release that I am freeing and holding D. Knight Designs harmless from any and all possible actual or claimed conduct, either by way of act or omission by D. Knight Designs, or any of its agents, whether in the application of the products to be used.

I hereby grant D. Knight Designs the unrestricted, unlimited right and permission to use and reproduce, copyright, publish, and exhibit in any form, any manner, and in any media whatsoever, whether now existing or hereafter developed (including without any limitation advertising, collateral, promotional materials, and the internet), any and all photographs, videotapes, or other means of reproduction of my physical likeness taken on the date hereof, without restriction of the date of use.

I hereby waive any rights I may have to inspect or approve any of the finished or unfinished photographs, videotapes, or other means of reproductions referred to herein, so long as the uses are for lawful purposes.

I am eighteen years of age or older, and I have carefully read the above and thoroughly understand its terms and meaning and I know of no reason why I am not free and competent to grant this release.

I agree to the above specified conditions.

\_\_\_\_\_  
Model Name (Please Print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Model Signature

\_\_\_\_\_  
Date

CONFIDENTIAL V.08.1 Revised: 1.20.2008

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