"Windy City LIVE's Search For A Star" IF YOU A MEMBER OF SAG/AFTRA, ALERT SOMEONE FROM THE WCL STAFF.

WLS TELEVISION, INC. 190 North State Street, Chicago, IL 60601 (312) 750-7000

Date: ___

To whom it may concern.		
Program as exhibited to the public, I hereby ir and participation on the program at your disc appearance, participation and any materials v	revocably grant to WLS T retion; to the recording (l vhich I supply or use duri grams, in any and all med	reinafter, "the Program"), and to induce you to use my appearance in the relevision, Inc. (hereinafter, "you") my consent to your use of my appearance by photograph, film, tape and aural devices), in whole or in part, of my mg my appearance on the program; and to any use of Program excerpts in dia as have been or may be devised (including, but not limited to, television and DVD), worldwide in perpetuity.
Program for all purposes and that you shall ha any and all media as has been or may be devis	ave the right to use and li sed, worldwide in perpet	in and to the Program and all recordings made in connection with the cense others to use the Program or such recordings (in whole or in part) in uity, without further compensation or consideration to me. I agree that I le or interest of any kind in or to the Program or my appearance or
	vertise the Program, you	ame, likeness, picture, voice and biographical material for informational and r products and services or those of any sponsor of the Program (but not for vice).
agents, employees, successors and assigns in	the event of any and all c	espective parent and subsidiary companies, and their officers, directors, laims, by whomever or whenever asserted, arising out of your use of my rogram, including without limitation claims for defamation or invasion of
agreed to accept, and will not accept or agree	to accept, directly or ind	ogram and listed below, I represent and warrant that I have not accepted or lirectly, any money, service or other valuable consideration for the inclusion prior consent, mention or identify on the Program any product, service,
of me or my organization or any ventures in w	hich I am or may be enga	an endorsement by the Program or by any of its producers, hosts, employees aged. I further understand that I am not authorized to use the names, logos, ducers, hosts or employees to falsely suggest any such endorsement or
I understand that you have no obligation here edit my appearance as you see fit.	eunder to record or to ma	ike use of my appearance and participation on the Program and that you may
NAME:		IF MINOR, PARENT OR GUARDIAN MUST SIGN:
		NAME:
SIGNATURE:		
HOME ADDRESS:		SIGNATURE:
ZIP:		
FOR WCL STAFF USE ONLY		
PARTICIPANT #	TOA:	CALL BACK: