Novum Films Present

*REASON*

Copyright Release Form

Yolanda Taylor (the “Producer”)
University of Lincoln
Brayford Pool
Lincoln
LN6 7TS

Name and address of Artist:

……Robert Jones………………………………………………………………………………………

……8 Swan Meadow…………………………………………………………………………………

……Stratford St Mary…………………………………………………………………………………

……Colchester………………………………………………………………………………………….

……Essex……………………………………………………………………………………………….

Telephone number of Artist: ……07746632561…………………………………………………………………….

*Belonging* (the “Film”)

I agree to the use of all donated stills, video footage and Music by myself to the above production. I declare that I am the copyright owner of all donated material to be used in the above named production. I understand that the copyright material will be edited and there is no guarantee that it will appear in the final Film. I agree that the copyright may be used to publicise the Film.

I understand that this Film (or part of it) may be distributed in any medium in any part of the world.

This agreement shall be governed by and constructed in accordance with the law of England and Wales and subject to the jurisdiction of the English Courts.

Signed by Artist: …….………………………………………………………………………………....

Dated: …………………………15/11/14………………………………………………………………………