

MODEL RELEASE TO HARMONY CONCEPTS, Inc.

For valuable consideration already received, I hereby irrevocably consent to and authorize the unconditional use and reproduction and marketing by Harmony Concepts and my producer(s) whose name(s) is/are \_\_\_\_\_ of all photographs, film and/or videotape or DVD recordings for which I have modeled this day. Harmony may use this material for DVD or videotape or photo sales, internet streaming, downloadable clips, all other electronic media, plus advertising and publication when and where it sees fit without further compensation to me. It is my understanding that my producer(s) and Harmony Concepts, Inc. will share evenly for two full years from this material's release date in whatever gross revenues are generated from sales of this material, after which full ownership of this material will be conveyed to Harmony Concepts into perpetuity for whatever legal purposes it chooses.

I certify that I am at least 18 years old and submit as proof of my identity and age a photo ID which may be maintained on file as the property of Harmony Concepts, Inc.

I fully understand that the materials for which I have modeled in conjunction with this release depict consensual bondage activities between consenting partners and that these depictions are not intended to represent or encourage harmful or degrading behavior. I posed for the material covered by this release in full awareness of what I was doing and completely of my own free will without any undue persuasion, coercion, deception, force or misrepresentation by Harmony Concepts.

I further understand that my legal name will not be used in conjunction with these activities and that my name, address, phone number and other personal information will not be released to any persons or organizations outside of Harmony Concepts for any reason whatsoever.

MODEL'S LEGAL NAME  
(Please print:

\_\_\_\_\_

MODEL'S DATE OF BIRTH

\_\_\_\_\_

ADDRESS:

\_\_\_\_\_

CITY, STATE & ZIP:

\_\_\_\_\_

PHONE:

\_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_

FICTIONAL NAME:

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SIGNATURE:

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WITNESS (Please print & Sign Name):

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TODAY'S DATE:

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