

## COMMITMENT

## FOR CESSION OF IMAGE COPYRIGHT

between Film Production:	
(Program maker of Community TV Salzburg Gemeinnützige	BetriebsgmbH)
and	
First Name:	
Name:	
Address:	
Date and place of birth:	
Phone/email:	
declares with this, that he/she gives his/her consent on ce producer for every possible use and release of the imagesin	produced at the
All generated copyrights for every kind of production, usag images and sounds belong to the producer.	ge and release, including TV and Internet, of al
Place, date	Place, date
The Producer	The Signer