



## TESTIMONIAL RELEASE FORM

Date \_\_\_\_\_

Testimonial Statement and/or Inventory of Testimonial Materials:

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### Authorization and Release Information

I understand my testimonial as outlined above (the "Testimonial") and made on behalf of NEWCOM Wireless Services (hereinafter called "NEWCOM") may be used in connection with publicizing and promoting NEWCOM. I authorize NEWCOM to use my name, brief biographical information, and the Testimonial as defined on this form.

I hereby irrevocably authorize NEWCOM to copy, exhibit, publish or distribute the Testimonial for purposes of publicizing NEWCOM's programs or for any other lawful purpose. These statements may be used in printed publications, multimedia presentations, on websites or in any other distribution media. I agree that I will make no monetary or other claim against NEWCOM for the use of the statement.

In addition, I waive any right to inspect or approve the finished product, including written copy, wherein my likeness or my testimonial appears.

I hereby hold harmless and release NEWCOM from all claims, demands and causes of action which I, my heirs, representatives, executors, administrators or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

I have read the authorization and release information and give my consent for the use as indicated above.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

Company Name: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_