

HATCHET III
H3 Exports LLC

1:16

I hereby grant Aloupis Productions, LLC permission to photograph me and to record my voice, performances, poses, acts, plays, and appearances and use my picture, photograph, silhouette, and other reproductions of my physical likeness and sound in the above-named production and in the unlimited distribution, advertising, promotion, exhibition, and exploitation of the production by any method or device now known or hereafter devised in which the same may be used. I agree that I will not assert or maintain against you or your successors, assigns, and licensees any claim, action, suit, or demand of any kind or nature whatsoever in connection with your authorized use of my physical likeness and sound in the production as herein provided. I understand there is no compensation whatsoever in any form for my involvement in the production.

I agree that I will abide by all rules dictated by the Production Company or its agents, or by any Safety Coordinators assigned to The Production, especially those rules pertaining to safety, including but not limited to: (a) remaining in areas designated as safe areas during any period that I am not asked to perform my duties as an extra, and (b) acting in a safe manner at all times so as not to injure myself or others, and (c) to refrain from taking any illegal substances that might impair my ability to do the job for which I was hired.

As a further condition of participation herein, I agree that I have the ability to perform each and every task, job assignment, or special ability I have been asked to perform, and that if I knowingly make false representations that I am qualified to perform these assignments when, in fact, I know that I am not qualified, that such misrepresentation may be grounds for dismissal of any workers compensation claim should I be injured as a result of performing an assignment for which I knowingly was not qualified to perform.

I have read the entire conditions of participation and by signing this voucher, I acknowledge that I understand and agree with the entire conditions of my participation.

SIGNATURE (if minor, parent or guardian must sign) 

PRINT Name Amanda Rutin Date 6-15-12

SOCIAL SECURITY 439896199

APPROVED BY TITLE _____

HATCHET III
H3 Exports LLC

1:16

I hereby grant Aloupis Productions, LLC permission to photograph me and to record my voice, performances, poses, acts, plays, and appearances and use my picture, photograph, silhouette, and other reproductions of my physical likeness and sound in the above-named production and in the unlimited distribution, advertising, promotion, exhibition, and exploitation of the production by any method or device now known or hereafter devised in which the same may be used. I agree that I will not assert or maintain against you or your successors, assigns, and licensees any claim, action, suit, or demand of any kind or nature whatsoever in connection with your authorized use of my physical likeness and sound in the production as herein provided. I understand there is no compensation whatsoever in any form for my involvement in the production.

I agree that I will abide by all rules dictated by the Production Company or its agents, or by any Safety Coordinators assigned to The Production, especially those rules pertaining to safety, including but not limited to: (a) remaining in areas designated as safe areas during any period that I am not asked to perform my duties as an extra, and (b) acting in a safe manner at all times so as not to injure myself or others, and (c) to refrain from taking any illegal substances that might impair my ability to do the job for which I was hired.

As a further condition of participation herein, I agree that I have the ability to perform each and every task, job assignment, or special ability I have been asked to perform, and that if I knowingly make false representations that I am qualified to perform these assignments when, in fact, I know that I am not qualified, that such misrepresentation may be grounds for dismissal of any workers compensation claim should I be injured as a result of performing an assignment for which I knowingly was not qualified to perform.

I have read the entire conditions of participation and by signing this voucher, I acknowledge that I understand and agree with the entire conditions of my participation.

SIGNATURE (if minor, parent or guardian must sign) *Darby Fabre*

PRINT Name *Darby Fabre* Date *6/15/12*

SOCIAL SECURITY *437-91-2466*

APPROVED BY TITLE _____

1:10

HATCHET III
H3 Exports LLC

I hereby grant Aloupis Productions, LLC permission to photograph me and to record my voice, performances, poses, acts, plays, and appearances and use my picture, photograph, silhouette, and other reproductions of my physical likeness and sound in the above-named production and in the unlimited distribution, advertising, promotion, exhibition, and exploitation of the production by any method or device now known or hereafter devised in which the same may be used. I agree that I will not assert or maintain against you or your successors, assigns, and licensees any claim, action, suit, or demand of any kind or nature whatsoever in connection with your authorized use of my physical likeness and sound in the production as herein provided. I understand there is no compensation whatsoever in any form for my involvement in the production.

I agree that I will abide by all rules dictated by the Production Company or its agents, or by any Safety Coordinators assigned to The Production, especially those rules pertaining to safety, including but not limited to: (a) remaining in areas designated as safe areas during any period that I am not asked to perform my duties as an extra, and (b) acting in a safe manner at all times so as not to injure myself or others, and (c) to refrain from taking any illegal substances that might impair my ability to do the job for which I was hired.

As a further condition of participation herein, I agree that I have the ability to perform each and every task, job assignment, or special ability I have been asked to perform, and that if I knowingly make false representations that I am qualified to perform these assignments when, in fact, I know that I am not qualified, that such misrepresentation may be grounds for dismissal of any workers compensation claim should I be injured as a result of performing an assignment for which I knowingly was not qualified to perform.

I have read the entire conditions of participation and by signing this voucher, I acknowledge that I understand and agree with the entire conditions of my participation.

SIGNATURE (if minor, parent or guardian must sign) Bryce Schell

PRINT Name Bryce Schell Date 6-15-12

SOCIAL SECURITY 434-91-7076

APPROVED BY TITLE _____

✓ 1:16
HATCHET III
H3 Exports LLC

I hereby grant Aloupis Productions, LLC permission to photograph me and to record my voice, performances, poses, acts, plays, and appearances and use my picture, photograph, silhouette, and other reproductions of my physical likeness and sound in the above-named production and in the unlimited distribution, advertising, promotion, exhibition, and exploitation of the production by any method or device now known or hereafter devised in which the same may be used. I agree that I will not assert or maintain against you or your successors, assigns, and licensees any claim, action, suit, or demand of any kind or nature whatsoever in connection with your authorized use of my physical likeness and sound in the production as herein provided. I understand there is no compensation whatsoever in any form for my involvement in the production.

I agree that I will abide by all rules dictated by the Production Company or its agents, or by any Safety Coordinators assigned to The Production, especially those rules pertaining to safety, including but not limited to: (a) remaining in areas designated as safe areas during any period that I am not asked to perform my duties as an extra, and (b) acting in a safe manner at all times so as not to injure myself or others, and (c) to refrain from taking any illegal substances that might impair my ability to do the job for which I was hired.

As a further condition of participation herein, I agree that I have the ability to perform each and every task, job assignment, or special ability I have been asked to perform, and that if I knowingly make false representations that I am qualified to perform these assignments when, in fact, I know that I am not qualified, that such misrepresentation may be grounds for dismissal of any workers compensation claim should I be injured as a result of performing an assignment for which I knowingly was not qualified to perform.

I have read the entire conditions of participation and by signing this voucher, I acknowledge that I understand and agree with the entire conditions of my participation.

SIGNATURE (If minor, parent or guardian must sign) _____

PRINT Name Everett St. Andre Date 9/15/12

SOCIAL SECURITY 435-49-3271

APPROVED BY TITLE _____

HATCHET III
H3 Exports LLC

I hereby grant Aloupis Productions, LLC permission to photograph me and to record my voice, performances, poses, acts, plays, and appearances and use my picture, photograph, silhouette, and other reproductions of my physical likeness and sound in the above-named production and in the unlimited distribution, advertising, promotion, exhibition, and exploitation of the production by any method or device now known or hereafter devised in which the same may be used. I agree that I will not assert or maintain against you or your successors, assigns, and licensees any claim, action, suit, or demand of any kind or nature whatsoever in connection with your authorized use of my physical likeness and sound in the production as herein provided. I understand there is no compensation whatsoever in any form for my involvement in the production.

I agree that I will abide by all rules dictated by the Production Company or its agents, or by any Safety Coordinators assigned to The Production, especially those rules pertaining to safety, including but not limited to: (a) remaining in areas designated as safe areas during any period that I am not asked to perform my duties as an extra, and (b) acting in a safe manner at all times so as not to injure myself or others, and (c) to refrain from taking any illegal substances that might impair my ability to do the job for which I was hired.

As a further condition of participation herein, I agree that I have the ability to perform each and every task, job assignment, or special ability I have been asked to perform, and that if I knowingly make false representations that I am qualified to perform these assignments when, in fact, I know that I am not qualified, that such misrepresentation may be grounds for dismissal of any workers compensation claim should I be injured as a result of performing an assignment for which I knowingly was not qualified to perform.

I have read the entire conditions of participation and by signing this voucher, I acknowledge that I understand and agree with the entire conditions of my participation.

SIGNATURE (if minor, parent or guardian must sign)



PRINT Name

TINA STEPHENSON

Date

6-15-12

SOCIAL SECURITY

436-55-6587

APPROVED BY TITLE _____

HATCHET III
H3 Exports LLC

I hereby grant Aloupis Productions, LLC permission to photograph me and to record my voice, performances, poses, acts, plays, and appearances and use my picture, photograph, silhouette, and other reproductions of my physical likeness and sound in the above-named production and in the unlimited distribution, advertising, promotion, exhibition, and exploitation of the production by any method or device now known or hereafter devised in which the same may be used. I agree that I will not assert or maintain against you or your successors, assigns, and licensees any claim, action, suit, or demand of any kind or nature whatsoever in connection with your authorized use of my physical likeness and sound in the production as herein provided. I understand there is no compensation whatsoever in any form for my involvement in the production.

I agree that I will abide by all rules dictated by the Production Company or its agents, or by any Safety Coordinators assigned to The Production, especially those rules pertaining to safety, including but not limited to: (a) remaining in areas designated as safe areas during any period that I am not asked to perform my duties as an extra, and (b) acting in a safe manner at all times so as not to injure myself or others, and (c) to refrain from taking any illegal substances that might impair my ability to do the job for which I was hired.

As a further condition of participation herein, I agree that I have the ability to perform each and every task, job assignment, or special ability I have been asked to perform, and that if I knowingly make false representations that I am qualified to perform these assignments when, in fact, I know that I am not qualified, that such misrepresentation may be grounds for dismissal of any workers compensation claim should I be injured as a result of performing an assignment for which I knowingly was not qualified to perform.

I have read the entire conditions of participation and by signing this voucher, I acknowledge that I understand and agree with the entire conditions of my participation.

SIGNATURE (if minor, parent or guardian must sign)



PRINT Name

Bre-tinn Gatchuk

Date

6-15-12

SOCIAL SECURITY

438-57-6565

APPROVED BY TITLE _____

HATCHET III
H3 Exports LLC

I hereby grant Aloupis Productions, LLC permission to photograph me and to record my voice, performances, poses, acts, plays, and appearances and use my picture, photograph, silhouette, and other reproductions of my physical likeness and sound in the above-named production and in the unlimited distribution, advertising, promotion, exhibition, and exploitation of the production by any method or device now known or hereafter devised in which the same may be used. I agree that I will not assert or maintain against you or your successors, assigns, and licensees any claim, action, suit, or demand of any kind or nature whatsoever in connection with your authorized use of my physical likeness and sound in the production as herein provided. I understand there is no compensation whatsoever in any form for my involvement in the production.

I agree that I will abide by all rules dictated by the Production Company or its agents, or by any Safety Coordinators assigned to The Production, especially those rules pertaining to safety, including but not limited to: (a) remaining in areas designated as safe areas during any period that I am not asked to perform my duties as an extra, and (b) acting in a safe manner at all times so as not to injure myself or others, and (c) to refrain from taking any illegal substances that might impair my ability to do the job for which I was hired.

As a further condition of participation herein, I agree that I have the ability to perform each and every task, job assignment, or special ability I have been asked to perform, and that if I knowingly make false representations that I am qualified to perform these assignments when, in fact, I know that I am not qualified, that such misrepresentation may be grounds for dismissal of any workers compensation claim should I be injured as a result of performing an assignment for which I knowingly was not qualified to perform.

I have read the entire conditions of participation and by signing this voucher, I acknowledge that I understand and agree with the entire conditions of my participation.

SIGNATURE (If minor, parent or guardian must sign) _____

PRINT Name David Cross Date 6/15/12

SOCIAL SECURITY 571954896

APPROVED BY TITLE _____

HATCHET III
H3 Exports LLC

I hereby grant Aloupis Productions, LLC permission to photograph me and to record my voice, performances, poses, acts, plays, and appearances and use my picture, photograph, silhouette, and other reproductions of my physical likeness and sound in the above-named production and in the unlimited distribution, advertising, promotion, exhibition, and exploitation of the production by any method or device now known or hereafter devised in which the same may be used. I agree that I will not assert or maintain against you or your successors, assigns, and licensees any claim, action, suit, or demand of any kind or nature whatsoever in connection with your authorized use of my physical likeness and sound in the production as herein provided. I understand there is no compensation whatsoever in any form for my involvement in the production.

I agree that I will abide by all rules dictated by the Production Company or its agents, or by any Safety Coordinators assigned to The Production, especially those rules pertaining to safety, including but not limited to: (a) remaining in areas designated as safe areas during any period that I am not asked to perform my duties as an extra, and (b) acting in a safe manner at all times so as not to injure myself or others, and (c) to refrain from taking any illegal substances that might impair my ability to do the job for which I was hired.

As a further condition of participation herein, I agree that I have the ability to perform each and every task, job assignment, or special ability I have been asked to perform, and that if I knowingly make false representations that I am qualified to perform these assignments when, in fact, I know that I am not qualified, that such misrepresentation may be grounds for dismissal of any workers compensation claim should I be injured as a result of performing an assignment for which I knowingly was not qualified to perform.

I have read the entire conditions of participation and by signing this voucher, I acknowledge that I understand and agree with the entire conditions of my participation.

SIGNATURE (If minor, parent or guardian must sign) *Dennis Hangis*

PRINT Name *Dennis Hangis* Date *6/15/12*

SOCIAL SECURITY *438-02-7240*

APPROVED BY TITLE _____

HATCHET III
H3 Exports LLC

I hereby grant Aloupis Productions, LLC permission to photograph me and to record my voice, performances, poses, acts, plays, and appearances and use my picture, photograph, silhouette, and other reproductions of my physical likeness and sound in the above-named production and in the unlimited distribution, advertising, promotion, exhibition, and exploitation of the production by any method or device now known or hereafter devised in which the same may be used. I agree that I will not assert or maintain against you or your successors, assigns, and licensees any claim, action, suit, or demand of any kind or nature whatsoever in connection with your authorized use of my physical likeness and sound in the production as herein provided. I understand there is no compensation whatsoever in any form for my involvement in the production.

I agree that I will abide by all rules dictated by the Production Company or its agents, or by any Safety Coordinators assigned to The Production, especially those rules pertaining to safety, including but not limited to: (a) remaining in areas designated as safe areas during any period that I am not asked to perform my duties as an extra, and (b) acting in a safe manner at all times so as not to injure myself or others, and (c) to refrain from taking any illegal substances that might impair my ability to do the job for which I was hired.

As a further condition of participation herein, I agree that I have the ability to perform each and every task, job assignment, or special ability I have been asked to perform, and that if I knowingly make false representations that I am qualified to perform these assignments when, in fact, I know that I am not qualified, that such misrepresentation may be grounds for dismissal of any workers compensation claim should I be injured as a result of performing an assignment for which I knowingly was not qualified to perform.

I have read the entire conditions of participation and by signing this voucher, I acknowledge that I understand and agree with the entire conditions of my participation.

SIGNATURE (If minor, parent or guardian must sign)



PRINT Name

Lauren E. Hale

Date

10-15-12

SOCIAL SECURITY

ABA-93-244A

APPROVED BY TITLE _____

HATCHET III
H3 Exports LLC

I hereby grant Aloupis Productions, LLC permission to photograph me and to record my voice, performances, poses, acts, plays, and appearances and use my picture, photograph, silhouette, and other reproductions of my physical likeness and sound in the above-named production and in the unlimited distribution, advertising, promotion, exhibition, and exploitation of the production by any method or device now known or hereafter devised in which the same may be used. I agree that I will not assert or maintain against you or your successors, assigns, and licensees any claim, action, suit, or demand of any kind or nature whatsoever in connection with your authorized use of my physical likeness and sound in the production as herein provided. I understand there is no compensation whatsoever in any form for my involvement in the production.

I agree that I will abide by all rules dictated by the Production Company or its agents, or by any Safety Coordinators assigned to The Production, especially those rules pertaining to safety, including but not limited to: (a) remaining in areas designated as safe areas during any period that I am not asked to perform my duties as an extra, and (b) acting in a safe manner at all times so as not to injure myself or others, and (c) to refrain from taking any illegal substances that might impair my ability to do the job for which I was hired.

As a further condition of participation herein, I agree that I have the ability to perform each and every task, job assignment, or special ability I have been asked to perform, and that if I knowingly make false representations that I am qualified to perform these assignments when, in fact, I know that I am not qualified, that such misrepresentation may be grounds for dismissal of any workers compensation claim should I be injured as a result of performing an assignment for which I knowingly was not qualified to perform.

I have read the entire conditions of participation and by signing this voucher, I acknowledge that I understand and agree with the entire conditions of my participation.

SIGNATURE (if minor, parent or guardian must sign)



PRINT Name

Garrison Goldbuck

Date

6/15/12

SOCIAL SECURITY

438-89-7390

APPROVED BY TITLE _____

HATCHET III
H3 Exports LLC

I hereby grant Aloupis Productions, LLC permission to photograph me and to record my voice, performances, poses, acts, plays, and appearances and use my picture, photograph, silhouette, and other reproductions of my physical likeness and sound in the above-named production and in the unlimited distribution, advertising, promotion, exhibition, and exploitation of the production by any method or device now known or hereafter devised in which the same may be used. I agree that I will not assert or maintain against you or your successors, assigns, and licensees any claim, action, suit, or demand of any kind or nature whatsoever in connection with your authorized use of my physical likeness and sound in the production as herein provided. I understand there is no compensation whatsoever in any form for my involvement in the production.

I agree that I will abide by all rules dictated by the Production Company or its agents, or by any Safety Coordinators assigned to The Production, especially those rules pertaining to safety, including but not limited to: (a) remaining in areas designated as safe areas during any period that I am not asked to perform my duties as an extra, and (b) acting in a safe manner at all times so as not to injure myself or others, and (c) to refrain from taking any illegal substances that might impair my ability to do the job for which I was hired.

As a further condition of participation herein, I agree that I have the ability to perform each and every task, job assignment, or special ability I have been asked to perform, and that if I knowingly make false representations that I am qualified to perform these assignments when, in fact, I know that I am not qualified, that such misrepresentation may be grounds for dismissal of any workers compensation claim should I be injured as a result of performing an assignment for which I knowingly was not qualified to perform.

I have read the entire conditions of participation and by signing this voucher, I acknowledge that I understand and agree with the entire conditions of my participation.

SIGNATURE (if minor, parent or guardian must sign)



PRINT Name

Malory Wiseman

Date

6/15/12

SOCIAL SECURITY

437917484

APPROVED BY TITLE _____

HATCHET III
H3 Exports LLC

I hereby grant Aloupis Productions, LLC permission to photograph me and to record my voice, performances, poses, acts, plays, and appearances and use my picture, photograph, silhouette, and other reproductions of my physical likeness and sound in the above-named production and in the unlimited distribution, advertising, promotion, exhibition, and exploitation of the production by any method or device now known or hereafter devised in which the same may be used. I agree that I will not assert or maintain against you or your successors, assigns, and licensees any claim, action, suit, or demand of any kind or nature whatsoever in connection with your authorized use of my physical likeness and sound in the production as herein provided. I understand there is no compensation whatsoever in any form for my involvement in the production.

I agree that I will abide by all rules dictated by the Production Company or its agents, or by any Safety Coordinators assigned to The Production, especially those rules pertaining to safety, including but not limited to: (a) remaining in areas designated as safe areas during any period that I am not asked to perform my duties as an extra, and (b) acting in a safe manner at all times so as not to injure myself or others, and (c) to refrain from taking any illegal substances that might impair my ability to do the job for which I was hired.

As a further condition of participation herein, I agree that I have the ability to perform each and every task, job assignment, or special ability I have been asked to perform, and that if I knowingly make false representations that I am qualified to perform these assignments when, in fact, I know that I am not qualified, that such misrepresentation may be grounds for dismissal of any workers compensation claim should I be injured as a result of performing an assignment for which I knowingly was not qualified to perform.

I have read the entire conditions of participation and by signing this voucher, I acknowledge that I understand and agree with the entire conditions of my participation.

SIGNATURE (if minor, parent or guardian must sign) Danaya Smith

PRINT Name Gregory Foster Date 6-16-12

SOCIAL SECURITY 433-45-9132

APPROVED BY TITLE _____

HATCHET III
H3 Exports LLC

I hereby grant Aloupis Productions, LLC permission to photograph me and to record my voice, performances, poses, acts, plays, and appearances and use my picture, photograph, silhouette, and other reproductions of my physical likeness and sound in the above-named production and in the unlimited distribution, advertising, promotion, exhibition, and exploitation of the production by any method or device now known or hereafter devised in which the same may be used. I agree that I will not assert or maintain against you or your successors, assigns, and licensees any claim, action, suit, or demand of any kind or nature whatsoever in connection with your authorized use of my physical likeness and sound in the production as herein provided. I understand there is no compensation whatsoever in any form for my involvement in the production.

I agree that I will abide by all rules dictated by the Production Company or its agents, or by any Safety Coordinators assigned to The Production, especially those rules pertaining to safety, including but not limited to: (a) remaining in areas designated as safe areas during any period that I am not asked to perform my duties as an extra, and (b) acting in a safe manner at all times so as not to injure myself or others, and (c) to refrain from taking any illegal substances that might impair my ability to do the job for which I was hired.

As a further condition of participation herein, I agree that I have the ability to perform each and every task, job assignment, or special ability I have been asked to perform, and that if I knowingly make false representations that I am qualified to perform these assignments when, in fact, I know that I am not qualified, that such misrepresentation may be grounds for dismissal of any workers compensation claim should I be injured as a result of performing an assignment for which I knowingly was not qualified to perform.

I have read the entire conditions of participation and by signing this voucher, I acknowledge that I understand and agree with the entire conditions of my participation.

SIGNATURE (If minor, parent or guardian must sign) 

PRINT Name Tim Johnson Date 6-16-12

SOCIAL SECURITY 604-05-8934

APPROVED BY TITLE _____

HATCHET III
H3 Exports LLC

I hereby grant Aloupis Productions, LLC permission to photograph me and to record my voice, performances, poses, acts, plays, and appearances and use my picture, photograph, silhouette, and other reproductions of my physical likeness and sound in the above-named production and in the unlimited distribution, advertising, promotion, exhibition, and exploitation of the production by any method or device now known or hereafter devised in which the same may be used. I agree that I will not assert or maintain against you or your successors, assigns, and licensees any claim, action, suit, or demand of any kind or nature whatsoever in connection with your authorized use of my physical likeness and sound in the production as herein provided. I understand there is no compensation whatsoever in any form for my involvement in the production.

I agree that I will abide by all rules dictated by the Production Company or its agents, or by any Safety Coordinators assigned to The Production, especially those rules pertaining to safety, including but not limited to: (a) remaining in areas designated as safe areas during any period that I am not asked to perform my duties as an extra, and (b) acting in a safe manner at all times so as not to injure myself or others, and (c) to refrain from taking any illegal substances that might impair my ability to do the job for which I was hired.

As a further condition of participation herein, I agree that I have the ability to perform each and every task, job assignment, or special ability I have been asked to perform, and that if I knowingly make false representations that I am qualified to perform these assignments when, in fact, I know that I am not qualified, that such misrepresentation may be grounds for dismissal of any workers compensation claim should I be injured as a result of performing an assignment for which I knowingly was not qualified to perform.

I have read the entire conditions of participation and by signing this voucher, I acknowledge that I understand and agree with the entire conditions of my participation.

SIGNATURE (if minor, parent or guardian must sign)



PRINT Name

CATHERINE L. BELL

Date

10-10-12

SOCIAL SECURITY #

438-90-2345

APPROVED BY TITLE

HATCHET III
H3 Exports LLC

I hereby grant Aloupis Productions, LLC permission to photograph me and to record my voice, performances, poses, acts, plays, and appearances and use my picture, photograph, silhouette, and other reproductions of my physical likeness and sound in the above-named production and in the unlimited distribution, advertising, promotion, exhibition, and exploitation of the production by any method or device now known or hereafter devised in which the same may be used. I agree that I will not assert or maintain against you or your successors, assigns, and licensees any claim, action, suit, or demand of any kind or nature whatsoever in connection with your authorized use of my physical likeness and sound in the production as herein provided. I understand there is no compensation whatsoever in any form for my involvement in the production.

I agree that I will abide by all rules dictated by the Production Company or its agents, or by any Safety Coordinators assigned to The Production, especially those rules pertaining to safety, including but not limited to: (a) remaining in areas designated as safe areas during any period that I am not asked to perform my duties as an extra, and (b) acting in a safe manner at all times so as not to injure myself or others, and (c) to refrain from taking any illegal substances that might impair my ability to do the job for which I was hired.

As a further condition of participation herein, I agree that I have the ability to perform each and every task, job assignment, or special ability I have been asked to perform, and that if I knowingly make false representations that I am qualified to perform these assignments when, in fact, I know that I am not qualified, that such misrepresentation may be grounds for dismissal of any workers compensation claim should I be injured as a result of performing an assignment for which I knowingly was not qualified to perform.

I have read the entire conditions of participation and by signing this voucher, I acknowledge that I understand and agree with the entire conditions of my participation.

SIGNATURE (if minor, parent or guardian must sign)



PRINT Name

BENJI WAUSON

Date

June 10 2012

SOCIAL SECURITY

503-109-1359

APPROVED BY TITLE _____

HATCHET III
H3 Exports LLC

I hereby grant Aloupis Productions, LLC permission to photograph me and to record my voice, performances, poses, acts, plays, and appearances and use my picture, photograph, silhouette, and other reproductions of my physical likeness and sound in the above-named production and in the unlimited distribution, advertising, promotion, exhibition, and exploitation of the production by any method or device now known or hereafter devised in which the same may be used. I agree that I will not assert or maintain against you or your successors, assigns, and licensees any claim, action, suit, or demand of any kind or nature whatsoever in connection with your authorized use of my physical likeness and sound in the production as herein provided. I understand there is no compensation whatsoever in any form for my involvement in the production.

I agree that I will abide by all rules dictated by the Production Company or its agents, or by any Safety Coordinators assigned to The Production, especially those rules pertaining to safety, including but not limited to: (a) remaining in areas designated as safe areas during any period that I am not asked to perform my duties as an extra, and (b) acting in a safe manner at all times so as not to injure myself or others, and (c) to refrain from taking any illegal substances that might impair my ability to do the job for which I was hired.

As a further condition of participation herein, I agree that I have the ability to perform each and every task, job assignment, or special ability I have been asked to perform, and that if I knowingly make false representations that I am qualified to perform these assignments when, in fact, I know that I am not qualified, that such misrepresentation may be grounds for dismissal of any workers compensation claim should I be injured as a result of performing an assignment for which I knowingly was not qualified to perform.

I have read the entire conditions of participation and by signing this voucher, I acknowledge that I understand and agree with the entire conditions of my participation.

SIGNATURE (if minor, parent or guardian must sign)



PRINT Name

Marcelo Paul

Date

6/16/12

SOCIAL SECURITY 434-53-2719

APPROVED BY TITLE _____

Aloupis Productions, LLC permission to photograph me and to record my voice, performances, poses, acts, plays, and
uses and use my picture, photograph, silhouette, and other reproductions of my physical likeness and sound in the above-named
production and in the unlimited distribution, advertising, promotion, exhibition, and exploitation of the production by any method or device now
known or hereafter devised in which the same may be used. I agree that I will not assert or maintain against you or your successors, assigns, and
assignees any claim, action, suit, or demand of any kind or nature whatsoever in connection with your authorized use of my physical likeness and
sound in the production as herein provided. I understand there is no compensation whatsoever in any form for my involvement in the production.

I agree that I will abide by all rules dictated by the Production Company or its agents, or by any Safety Coordinators assigned to The Production,
especially those rules pertaining to safety, including but not limited to: (a) remaining in areas designated as safe areas during any period that I am
not asked to perform my duties as an extra, and (b) acting in a safe manner at all times so as not to injure myself or others, and (c) to refrain from
taking any illegal substances that might impair my ability to do the job for which I was hired.

As a further condition of participation herein, I agree that I have the ability to perform each and every task, job assignment, or special ability I have
been asked to perform, and that if I knowingly make false representations that I am qualified to perform these assignments when, in fact, I know
that I am not qualified, that such misrepresentation may be grounds for dismissal of any workers compensation claim should I be injured as a
result of performing an assignment for which I knowingly was not qualified to perform.

I have read the entire conditions of participation and by signing this voucher, I acknowledge that I understand and agree with the entire conditions
of my participation.

SIGNATURE (if minor, parent or guardian must sign) Bridge Polley

PRINT Name Bridge Polley Date 6/14/12

SOCIAL SECURITY 480-91-7309

APPROVED BY TITLE _____

HATCHETT III
H3 Exports LLC

I hereby grant Aloupis Productions, LLC permission to photograph me and to record my voice, performances, poses, acts, plays, and appearances and use my picture, photograph, silhouette, and other reproductions of my physical likeness and sound in the above-named production and in the unlimited distribution, advertising, promotion, exhibition, and exploitation of the production by any method or device now known or hereafter devised in which the same may be used. I agree that I will not assert or maintain against you or your successors, assigns, and licensees any claim, action, suit, or demand of any kind or nature whatsoever in connection with your authorized use of my physical likeness and sound in the production as herein provided. I understand there is no compensation whatsoever in any form for my involvement in the production.

I agree that I will abide by all rules dictated by the Production Company or its agents, or by any Safety Coordinators assigned to The Production, especially those rules pertaining to safety, including but not limited to: (a) remaining in areas designated as safe areas during any period that I am not asked to perform my duties as an extra, and (b) acting in a safe manner at all times so as not to injure myself or others, and (c) to refrain from taking any illegal substances that might impair my ability to do the job for which I was hired.

As a further condition of participation herein, I agree that I have the ability to perform each and every task, job assignment, or special ability I have been asked to perform, and that if I knowingly make false representations that I am qualified to perform these assignments when, in fact, I know that I am not qualified, that such misrepresentation may be grounds for dismissal of any workers compensation claim should I be injured as a result of performing an assignment for which I knowingly was not qualified to perform.

I have read the entire conditions of participation and by signing this voucher, I acknowledge that I understand and agree with the entire conditions of my participation.

SIGNATURE (If minor, parent or guardian must sign) 

PRINT Name Michael Burkhardt Date _____

SOCIAL SECURITY 434-75-1224

APPROVED BY TITLE _____

HATCHET III
H3 Exports LLC


I hereby grant Aloupis Productions, LLC permission to photograph me and to record my voice, performances, poses, acts, plays, and appearances and use my picture, photograph, silhouette, and other reproductions of my physical likeness and sound in the above-named production and in the unlimited distribution, advertising, promotion, exhibition, and exploitation of the production by any method or device now known or hereafter devised in which the same may be used. I agree that I will not assert or maintain against you or your successors, assigns, and licensees any claim, action, suit, or demand of any kind or nature whatsoever in connection with your authorized use of my physical likeness and sound in the production as herein provided. I understand there is no compensation whatsoever in any form for my involvement in the production.

I agree that I will abide by all rules dictated by the Production Company or its agents, or by any Safety Coordinators assigned to The Production, especially those rules pertaining to safety, including but not limited to: (a) remaining in areas designated as safe areas during any period that I am not asked to perform my duties as an extra, and (b) acting in a safe manner at all times so as not to injure myself or others, and (c) to refrain from taking any illegal substances that might impair my ability to do the job for which I was hired.

As a further condition of participation herein, I agree that I have the ability to perform each and every task, job assignment, or special ability I have been asked to perform, and that if I knowingly make false representations that I am qualified to perform these assignments when, in fact, I know that I am not qualified, that such misrepresentation may be grounds for dismissal of any workers compensation claim should I be injured as a result of performing an assignment for which I knowingly was not qualified to perform.

I have read the entire conditions of participation and by signing this voucher, I acknowledge that I understand and agree with the entire conditions of my participation.

SIGNATURE (If minor, parent or guardian must sign)



PRINT Name

John Cloutier

Date

6/14/12

SOCIAL SECURITY

438944899

APPROVED BY TITLE

(504) 9088579

HATCHET III
H3 Exports LLC

I hereby grant Aloupis Productions, LLC permission to photograph me and to record my voice, performances, poses, acts, plays, and appearances and use my picture, photograph, silhouette, and other reproductions of my physical likeness and sound in the above-named production and in the unlimited distribution, advertising, promotion, exhibition, and exploitation of the production by any method or device now known or hereafter devised in which the same may be used. I agree that I will not assert or maintain against you or your successors, assigns, and licensees any claim, action, suit, or demand of any kind or nature whatsoever in connection with your authorized use of my physical likeness and sound in the production as herein provided. I understand there is no compensation whatsoever in any form for my involvement in the production.

I agree that I will abide by all rules dictated by the Production Company or its agents, or by any Safety Coordinators assigned to The Production, especially those rules pertaining to safety, including but not limited to: (a) remaining in areas designated as safe areas during any period that I am not asked to perform my duties as an extra, and (b) acting in a safe manner at all times so as not to injure myself or others, and (c) to refrain from taking any illegal substances that might impair my ability to do the job for which I was hired.

As a further condition of participation herein, I agree that I have the ability to perform each and every task, job assignment, or special ability I have been asked to perform, and that if I knowingly make false representations that I am qualified to perform these assignments when, in fact, I know that I am not qualified, that such misrepresentation may be grounds for dismissal of any workers compensation claim should I be injured as a result of performing an assignment for which I knowingly was not qualified to perform.

I have read the entire conditions of participation and by signing this voucher, I acknowledge that I understand and agree with the entire conditions of my participation.

SIGNATURE (If minor, parent or guardian must sign) _____



PRINT Name _____

Preston T. Cohen

Date _____

6.14.12

SOCIAL SECURITY _____

435-554259

APPROVED BY TITLE _____

HATCHET III
H3 Exports LLC

I hereby grant Aloupis Productions, LLC permission to photograph me and to record my voice, performances, poses, acts, plays, and appearances and use my picture, photograph, silhouette, and other reproductions of my physical likeness and sound in the above-named production and in the unlimited distribution, advertising, promotion, exhibition, and exploitation of the production by any method or device now known or hereafter devised in which the same may be used. I agree that I will not assert or maintain against you or your successors, assigns, and licensees any claim, action, suit, or demand of any kind or nature whatsoever in connection with your authorized use of my physical likeness and sound in the production as herein provided. I understand there is no compensation whatsoever in any form for my involvement in the production.

I agree that I will abide by all rules dictated by the Production Company or its agents, or by any Safety Coordinators assigned to The Production, especially those rules pertaining to safety, including but not limited to: (a) remaining in areas designated as safe areas during any period that I am not asked to perform my duties as an extra, and (b) acting in a safe manner at all times so as not to injure myself or others, and (c) to refrain from taking any illegal substances that might impair my ability to do the job for which I was hired.

As a further condition of participation herein, I agree that I have the ability to perform each and every task, job assignment, or special ability I have been asked to perform, and that if I knowingly make false representations that I am qualified to perform these assignments when, in fact, I know that I am not qualified, that such misrepresentation may be grounds for dismissal of any workers compensation claim should I be injured as a result of performing an assignment for which I knowingly was not qualified to perform.

I have read the entire conditions of participation and by signing this voucher, I acknowledge that I understand and agree with the entire conditions of my participation.

SIGNATURE (If minor, parent or guardian must sign)

Frank Menos (minor)

PRINT Name Frank Menos

Date 6-14-12

SOCIAL SECURITY 432-31-7108

APPROVED BY TITLE _____

HATCHET III
H3 Exports LLC

I hereby grant Aloupis Productions, LLC permission to photograph me and to record my voice, performances, poses, acts, plays, and appearances and use my picture, photograph, silhouette, and other reproductions of my physical likeness and sound in the above-named production and in the unlimited distribution, advertising, promotion, exhibition, and exploitation of the production by any method or device now known or hereafter devised in which the same may be used. I agree that I will not assert or maintain against you or your successors, assigns, and licensees any claim, action, suit, or demand of any kind or nature whatsoever in connection with your authorized use of my physical likeness and sound in the production as herein provided. I understand there is no compensation whatsoever in any form for my involvement in the production.

I agree that I will abide by all rules dictated by the Production Company or its agents, or by any Safety Coordinators assigned to The Production, especially those rules pertaining to safety, including but not limited to: (a) remaining in areas designated as safe areas during any period that I am not asked to perform my duties as an extra, and (b) acting in a safe manner at all times so as not to injure myself or others, and (c) to refrain from taking any illegal substances that might impair my ability to do the job for which I was hired.

As a further condition of participation herein, I agree that I have the ability to perform each and every task, job assignment, or special ability I have been asked to perform, and that if I knowingly make false representations that I am qualified to perform these assignments when, in fact, I know that I am not qualified, that such misrepresentation may be grounds for dismissal of any workers compensation claim should I be injured as a result of performing an assignment for which I knowingly was not qualified to perform.

I have read the entire conditions of participation and by signing this voucher, I acknowledge that I understand and agree with the entire conditions of my participation.

SIGNATURE (if minor, parent or guardian must sign)



PRINT Name James L. Drachenbers

Date 6-14-12

SOCIAL SECURITY 435-15-0118

APPROVED BY TITLE _____

HATCHET III
H3 Exports LLC

I hereby grant Aloupis Productions, LLC permission to photograph me and to record my voice, performances, poses, acts, plays, and appearances and use my picture, photograph, silhouette, and other reproductions of my physical likeness and sound in the above-named production and in the unlimited distribution, advertising, promotion, exhibition, and exploitation of the production by any method or device now known or hereafter devised in which the same may be used. I agree that I will not assert or maintain against you or your successors, assigns, and licensees any claim, action, suit, or demand of any kind or nature whatsoever in connection with your authorized use of my physical likeness and sound in the production as herein provided. I understand there is no compensation whatsoever in any form for my involvement in the production.

I agree that I will abide by all rules dictated by the Production Company or its agents, or by any Safety Coordinators assigned to The Production, especially those rules pertaining to safety, including but not limited to: (a) remaining in areas designated as safe areas during any period that I am not asked to perform my duties as an extra, and (b) acting in a safe manner at all times so as not to injure myself or others, and (c) to refrain from taking any illegal substances that might impair my ability to do the job for which I was hired.

As a further condition of participation herein, I agree that I have the ability to perform each and every task, job assignment, or special ability I have been asked to perform, and that if I knowingly make false representations that I am qualified to perform these assignments when, in fact, I know that I am not qualified, that such misrepresentation may be grounds for dismissal of any workers compensation claim should I be injured as a result of performing an assignment for which I knowingly was not qualified to perform.

I have read the entire conditions of participation and by signing this voucher, I acknowledge that I understand and agree with the entire conditions of my participation.

SIGNATURE (if minor, parent or guardian must sign)

PRINT Name Gregory Gaines

Date 6/14/12

SOCIAL SECURITY 434-95-2059

APPROVED BY TITLE _____