



## **Public/Educational/Commercial, etc. Use Contract**

For viewing the movie trailer, you may refer people to our website,  
[www.SacredLife.com](http://www.SacredLife.com), (see the “Productions” page).

Sharon Lund – Producer, Sacred Life Productions  
2260 El Cajon Blvd. Suite 502  
San Diego, CA 92104  
619-692-9507

Sacred Life Productions of SLSD, Inc. agrees to allow commercial use of their documentary, *Dying to LIVE: NDE, (Near-Death Experiences)* for a fee. Under this agreement, commercial use includes screening the film for personal use, group screenings for corporate or business training, or public screenings **within your organization only**, for either complimentary or paid admission. By purchasing screening rights to *Dying to LIVE: NDE* at the price below, you may show our documentary as often as you choose, to as many people as you desire **within your organization**. However, if you charge people or ask for a love offering to watch *Dying to LIVE: NDE*, you agree to pay “Sacred Life Productions” \$2.00 (two dollars) per person in attendance of each of screening. Please make your check payable to “Sacred Life Productions” and mail it within two weeks of the screening to the address above.

Upon purchase (check, credit card, PayPal, money order) payment, you are authorized to screen the DVD copy of *Dying to LIVE: NDE* and may use and reproduce the accompanying educational workbook for classes, workshops, etc. Please circle your organization, company,

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hospice, senior, bereavement, church, etc. size to determine the cost of purchasing *Dying to LIVE: NDE*.

2-50 = \$ 90.00

51-200 = \$175.00

201 + = \$285.00

If you have a gathering, we'd be more than happy to attend the screening and answer questions. We also do workshops about the topics in the documentary.

Please Note: *MASS MARKET OR INTERNET USE IS PROHIBITED AND WILL CREATE A BREACH OF CONTRACT AND EXPOSE YOU TO COPYRIGHT INFRINGEMENTS.* Please sign and date this form and mail it back to the above address. Should you have any questions please contact us at the above phone number.

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

Sacred Life Production, Team Member

Print your name: \_\_\_\_\_

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

Organization: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

Phone number: \_\_\_\_\_ email: \_\_\_\_\_