



PHOTO, VIDEO, TESTIMONIAL RELEASE FORM

Authorization for Release of Photograph, Voice, Use of Likeness or Printed Quotes or Statements for:

Student Athlete's Full Name: _____

AUTHORIZATION FOR USE

By signing this document I/We hereby release to Student Athlete International (SAI) and its officers, agents, employees, independent contractors and/or affiliates the rights of my/our child's or my/our child's company's photograph, image, likeness, representative's voice as recorded on videotape or film, and any oral or written statement(s), regardless of format (whether they are direct quotes or paraphrased by SAI) for the purpose of promotional videos, publications, and marketing material, including Internet publications.

USE OF TESTIMONIAL, PHOTO, VIDEO

I/We understand that these testimonials and reproductions may be used in the production of materials used to promote SAI's programs, services and events or SAI in general, in perpetuity. I/We waive any right that I/We may have to inspect and approve the finished product that may be used or to which it may be applied now and/or in the future, whether that use is known to me/us or my/our child or unknown, and I/We waive any right to royalties or other compensation arising from or related to the use of the image, voice or product.

PERMISSIONS

I/We understand that the choice of which reproduction is to be used, if any, is at the discretion of SAI, and that the decision would be based on artistic merit, specific design needs, technical requirements, and marketing and communication strategies.

I/We also understand that I/We do not have copyrights to any photographs, video or electronic reproductions made by SAI.



I/We further acknowledge that:

- (1) I/We am/are the parent/guardian of the student athlete listed above;
- (2) I/We have read this release in its entirety;
- (3) I/We fully understand and accept its terms; and
- (4) I/We have executed this release voluntarily.

Printed name of parent/legal guardian 1

Signature of parent/legal guardian 1

Email

Phone

Date

Printed name of parent/legal guardian 2

Signature of parent/legal guardian 2

Email

Phone

Date