



MEDIA RELEASE FORM-PARENT/GUARDIAN

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: _____

Parent/Guardian Full Name: _____

AUTHORIZATION FOR USE-By signing this document I hereby release to Student Athlete International (SAI) and its officers, agents, employees, independent contractors and/or affiliates the rights of my or my 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.

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I further acknowledge that:

(1) I am the legal parent/ guardian of above-named student athlete;

(2) I have read this release in its entirety;

(3) I fully understand and accept its terms; and

(4) I have executed this release voluntarily.

Printed name of Parent/Guardian-1

Signature of Parent/Guardian -1

Email _____

Phone: _____ Date _____

Printed name of Parent/Guardian-2

Signature of Parent/Guardian -2

Email _____

Phone: _____ Date _____