

# MATHCOUNTS®

## Photo/Video Release Form

I, \_\_\_\_\_, hereby grant full permission to any  
Please print full student name here  
MATHCOUNTS' organizers, competition staff/presenters, promoters, volunteers, sponsors or agents authorized by said persons and entities, to use photographs, video footage or any other records of MATHCOUNTS competitions, including my name, likeness, or voice for any legitimate purpose without compensation or remuneration to myself, my heirs, executors, administrators or assigns.

\_\_\_\_\_  
Participant's Name (Student or Coach) *Please print*

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature (of parent/guardian if release is for a student participant)

\_\_\_\_\_  
School Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State/ZIP

(\_\_\_\_\_) \_\_\_\_\_  
Phone

\_\_\_\_\_  
E-mail