

Media Release Form



I hereby give my consent to all photographs, audio recordings, and video recordings taken of my child, and/or his/her academic and extracurricular work presented in association with Young Entrepreneur Pitch Challenge and

School or Organization.

I understand that any such photographs, audio recordings, and video recordings become the property of

School or Organization,
and may be used by them or others with their consent for educational, instructional or promotional purposes in print, broadcast or electronic media formats now existing or in the future created.

I understand that I will not be compensated for the use of any photographs, audio or video.

Parent/guardian must check one of the following options:

- Yes, I give my consent.
- No, I do not give my consent.

▲ Print Child's Name

Grade

▲ Child's Signature

Date

School Name

Child's Email (optional) *If you would like to receive photos, videos and other details about the event.*

▲ Print Parent/Guardian Name

▲ Parent/Guardian Signature **(required)**

Date:

Parent/Guardian Email or Phone number **(required)**

So we can contact you regarding contest progress and outcomes.