



## Florida Odyssey of the Mind Association, Inc. REGIONAL TOURNAMENT MEDIA RELEASE

**Each participating team member, coach and official must fill out a copy of this form.**

- Team members and coaches must bring it to the Buccaneer Bay Tournament turn this in at the Team Registration Desk on Saturday morning of tournament in order to receive their registration packet.
- All judges must turn this form in to their Regional Problem Captain or if other official at worker registration check in on Saturday morning.

Your signature on this form permits the organizers and sponsors of the Odyssey of the Mind Program in Florida to use photographs of participants in public showings.

I hereby give my consent to Florida Odyssey of the Mind Association, Inc. to use my image for publicity purposes or for any lawful purpose whatsoever.

NAME: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

CITY: STATE: ZIP: \_\_\_\_\_

HOME PHONE: ( ) \_\_\_\_\_ CELL PHONE: ( ) \_\_\_\_\_

DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

**FOR TEAMS ONLY:**

MEMBERSHIP NAME: \_\_\_\_\_

MEMBERSHIP NUMBER: \_\_\_\_\_ GRADE: \_\_\_\_\_

SCHOOL (If not member name): \_\_\_\_\_

COACH NAME(S): \_\_\_\_\_

**Persons under 18 years of age must have the consent of a parent or guardian.**

I, the undersigned, being the parent or guardian of the above minor, do hereby consent to and agree to be bound by, the above release.

**PARENT'S SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_