

**2016-2017 VIDEO
RELEASE FOR
NON-TEAM MEMBERS**



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Full Name of Student Appearing in Video: _____

Full Name of Parent/Guardian of Student: _____

Parent/Guardian Address: _____
Street Address

City State ZIP Code

Parent/Guardian Email Address: _____

Parent/Guardian Phone Number: _____

Student's Official School of Record: _____

I, _____, hereby grant permission for my child, _____,
Name of Parent/Guardian Name of Student Appearing in Video

to appear in a video to be submitted in the Math Video Challenge. I have read and understand the Official Rules and Terms of Participation* for the Math Video Challenge. I grant permission to the MATHCOUNTS Foundation and the Math Video Challenge organizers, competition staff/presenters, promoters, volunteers, sponsors or agents authorized by said persons and entities, to use the video submission of any part thereof, including the name, likeness or voice of my child for any legitimate purpose without compensation or remuneration to myself, my heirs, executors, administrators or assigns.

**A copy of the Official Rules and Terms of Participation can be found at <http://videochallenge.mathcounts.org/rules>. Please direct any questions about the rules to MATHCOUNTS at videochallenge@mathcounts.org or (703) 299-9006.*

Printed Name of Parent/Guardian Signature of Parent/Guardian Date

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PARENT/GUARDIAN: Please submit this Video Release Form to the team advisor who is leading the team whose video your child appeared in for the Math Video Challenge.

TEAM ADVISOR: Please retain all completed Video Release Forms for your records. You are responsible for obtaining and keeping all necessary paperwork and permissions for participation of non-team members. You do not need to submit this form to MATHCOUNTS unless you are contacted by MATHCOUNTS regarding permissions for non-team members appearing in your team's video.