

**VIRGINIA SCIENCE OLYMPIAD
PARENTAL CONSENT AND RELEASE FOR STUDENT PARTICIPATION**

Student _____ School _____

Parent/Legal Guardian (if Student is under 18 years old): _____

CONSENT AND RELEASE FOR STUDENT PARTICIPATION

I understand that participation in Virginia Science Olympiad (“VASO”) activities involves a certain degree of risk and can be physically, mentally, and emotionally demanding. I have carefully considered the risk involved and have given consent for myself or my child to participate in this activity. I also understand that participation in this activity is entirely voluntary and requires participants to abide by applicable rules and standards of conduct. I understand that this may include participation in tournaments, training sessions, special events, competitions, and other activities related to VASO. It may also include travel under the supervision of the team coach or their authorized team representative. I release VASO, and all employees, volunteers, related parties, or other organizations associated with the activity from any and all claims, liability or cause of action arising out of this participation.

Printed Name: _____

Authorized Signature*: _____ Date: _____

MEDIA CONSENT

I hereby consent and agree that VASO, and all employees, volunteers, related parties, or other organizations associated with the activity have the right to take photographs, videotape, or digital recordings of my myself or my child and to use these in any and all media, now or hereafter known, and exclusively for any purpose. I further consent that my child’s name and identity may be revealed therein or by descriptive text or commentary.

I hereby release to VASO, its agents, and employees all rights to exhibit this work in print and electronic form publicly or privately and to market and sell copies. I waive any rights, claims, or interest I may have to control the use of my identity or likeness in whatever media used.

I understand that there will be no financial or other remuneration for these rights.

Printed Name: _____

Authorized Signature*: _____ Date: _____

*Signature by participant 18 years of age or older; otherwise signed by parent or legal guardian