

Participant Information

First Name

Last Name

Date of Birth

Address

City

T-shirt Size

State

Postal/Zip Code

Position(s)

Country

Grade Entering

Phone Number

School

E-mail

Alternate E-mail

Height

Emergency Contact

Name

Relationship to Participant

Phone Number

Alternate Phone Number

Release Form for Media Recording

I do hereby release to Tony Graystone Volleyball Cams, 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 recording me, either for initial or subsequent transmission or playback.

I represent that I am at least 18 years of age or that I am the legal guardian of registered participant, have read and understand the foregoing statement, and am competent to execute this agreement.

Printed Name of Parent/Guardian or Participant that is 18 Years Old

Signature

Date