



**RELEASE FORM**

Release forms may be handwritten. Illegible forms will *not* be accepted.  
**(This form must be completed for all events as specified in the event guidelines.)**

- Event Name:**
- Event #:**
- Contestant ID#:**
- Team ID# (if applicable):**

**I hereby consent irrevocably to the use and reproduction (electronically or in print) of any and all photographs taken of me in any form whatsoever for a Business Professionals of America Workplace Skills Assessment Program Competitive Event.**

**Consent is also granted for any printed matter or audio recording used in conjunction with the photograph(s) and with the use of my name.**

**I have read this document and am fully aware of the content and implications, legal and otherwise.**

This information must be completed here and will also be required online if this event is submitted to a BPA website for national competition.

|                   |  |
|-------------------|--|
| Name              |  |
| Address           |  |
| City , State, ZIP |  |

A printed copy with signature(s) must be provided for the judges before you present.

|           |      |
|-----------|------|
| Signature | Date |
|-----------|------|

Signature of Parent or Guardian:  
 (If person is under 18 years of age.)

|           |      |
|-----------|------|
| Signature | Date |
|-----------|------|