



## 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.)

Date: