

**LIABILITY AND MEDIA RELEASE FORM – For Student Participants**

I, \_\_\_\_\_,  
(print name of parent/guardian)

agree to release Florida Atlantic University (FAU) and its officers, employees, sponsors, and volunteers from all liability pertaining to the South Florida EnergyWhiz Expo.

I further agree to give FAU the right and permission to record my child participant’s name and likeness for educational or promotional use on photographs, audiotape, videotape, film, or any digital medium. FAU may exhibit or distribute all or any part of these recordings for any purpose which FAU deems appropriate. All such recordings shall be FAU’s property and without compensation.

Dated \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ (MM/DD/YYYY)

Name of Student Participant \_\_\_\_\_

Name of Parent/Guardian \_\_\_\_\_

**Signature of Parent/Guardian** \_\_\_\_\_