Media Release

Each participating team member, coach and official must fill out a copy of this form and ***turn it in at the Minnesota Odyssey of the Mind® Tournament check-in.*** *Persons under 18 years of age must have their parent or guardian sign.*
(Your signature on this form permits the organizers and sponsors of Minnesota Odyssey of the Mind to use videos and photographs of participants in public showings such as the Awards Ceremony or performances.) Your name will not be publicized unless we ask for additional permission and it is granted by you.

I hereby give my consent to Minnesota Odyssey of the Mind to use my image for publicity purposes.

NAME _____

HOME ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME PHONE (_____)_____ DATE _____

SIGNATURE _____

MEMBERSHIP NAME _____

MEMBERSHIP NUMBER _____

SCHOOL (If not member name) _____

GRADE _____

COACH'S NAME _____

Persons under 18 years of age must have the consent of a parent or guardian.

I, the undersigned, being the parent or guardian of the above minor, do hereby consent to, and agree to be bound by, the above release.

SIGNATURE _____

DATE _____

Do not mail or fax this form.
Bring it to Check-in at the Minnesota Odyssey of the Mind® Tournament.