ATHLETE PHOTO & VIDEO MEDIA RELEASE

THEE S.C.H.O.L.A.R. Athletic Association™ (TSAA)

ATHLETE AND PARENT / GUARDIAN INFORMATION

Athlete name: _____ Date: _____

Parent/legal guardian name (if athlete is under 18): _____

Email or phone: _____

PERMISSION

I am the athlete named below, or the parent/legal guardian authorized to provide permission for the athlete. I give THEE S.C.H.O.L.A.R. Athletic Association™ permission to use the athlete's selected photos and/or video for the purposes I select below. This permission is voluntary and applies only to the materials and uses selected on this form.

MATERIALS APPROVED — SELECT ALL THAT APPLY

- ☐ Photos submitted with the sponsorship inquiry/application
- ☐ Meet the Athlete video submitted with the sponsorship inquiry/application
- ☐ Other specific photo/video provided to TSAA (describe below)

Description: _____

APPROVED USES — SELECT ALL THAT APPLY

- ☐ TSAA website and TSAA social media
- ☐ TSAA presentations, reports, or updates shared with current or prospective sponsors, funders, or partners to describe TSAA's athlete-support work
- ☐ TSAA program records and internal review/administration

IDENTIFICATION PREFERENCE — SELECT ONE

- ☐ Athlete's first name may be used
- ☐ Athlete's full name may be used
- ☐ Do not identify the athlete by name

PLEASE READ

TSAA may crop, resize, caption, or make minor edits for presentation while keeping the material respectful and consistent with its original meaning. TSAA will not sell the selected media. Once posted or shared, TSAA cannot control copies, screenshots, or further distribution by others. TSAA is not required to use any material. Public posting and sharing with sponsors, funders, or partners are authorized only if selected above.

This media permission is separate from the sponsorship decision. Choosing not to authorize public or sponsor-facing use does not affect eligibility for sponsorship support. Permission may be withdrawn for future TSAA use by contacting TSAA in writing using the contact information through which the application was submitted. Withdrawal cannot undo uses already made or materials already distributed.

SIGNATURE

By signing, I confirm that I have read and understood this form and consent to the uses selected above.

Parent/legal guardian signature (if athlete is under 18): _____

Printed name: _____ Date: _____

Athlete signature (optional): _____ Date: _____

Return the completed form to THEE S.C.H.O.L.A.R. Athletic Association™ along with any media you have chosen to authorize.