

Release forms may be handwritten. Illegible forms will not be accepted.

All individuals included in a project, including the official competitor(s),

must sign a Release Form for him/herself for this event.

(This form must be completed for all events as specified in the event guidelines.)

VO<sub>3</sub>

Event #

Event Name	Software Development To	eams	
Member ID	00077759		
Team ID (if a	pplicable)		
all photograp	ent irrevocably to the use and hs and other media taken of n /orkplace Skills Assessment P	ne in any form whatsoever fo	
	o granted for any printed ma ograph(s) and with the use of		g used in conjunction
I have read the otherwise.	nis document and am fully awa	are of the content and implica	ations, legal and
	on must be completed here and for national competition.	will also be required online if	this event is submitted to a
Name	Sliman Aitraiss		
Address	6958 Endsliegh dr		
City	Reynoldsburg	State Ohio	ZIP <u>43068</u>
	with signature(s) must be prov	rided for the judges before you	present.
Signature	01/00/2004		
Date	01/08/2024		
•	rification arent or Guardian nder 18 years of age.)		
Signature			
Date			



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1/02

Event # \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Event Name Software Engineering Team
Member ID 20077883
Team ID (if applicable)
I hereby consent irrevocably to the use and reproduction (electronically or in print) of any and all photographs and other media 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, video, 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  AGGMA
Address 33 \$3 Swelter convt
City PLLIVIAGION State Ohio ZIP 43147
A printed copy with signature(s) must be provided for the judges before you present.
Signature Jewy angui
Date
Parental Verification
Signature of Parent or Guardian
(If person is under 18 years of age.)
Signature / Mulling / Mulling
Date [   0   24



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Event #	VU3				
<b>Event Name</b>	Software Engineering Team				
Member ID	00077764				
Team ID (if a	pplicable)				
all photograp	hs and other media taken of	d reproduction (electronically me in any form whatsoever fo Program Competitive Event.	y or in print) of any and or a Business Professionals		
	o granted for any printed magraph(s) and with the use of	atter, video, or audio recordii f my name.	ng used in conjunction		
I have read th otherwise.	nis document and am fully av	vare of the content and implic	cations, legal and		
	on must be completed here and or national competition.  Alexander Colburn	d will also be required online if	this event is submitted to a		
Address	15 Fair Oaks Lane				
City	Pickerington	State OH	ZIP 43147		
A printed copy Signature	with signature(s) must be pro	ovided for the judges before you	ı present.		
Date	1/10/2024				
-	rification arent or Guardian ader 18 years of age.)	\ \ \			
Signature	Grahea Col	ll			
Date	1-10-2024				



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Event #	VO3			
<b>Event Name</b>	Software Development Team			
Member ID	00077873			
Team ID (if a)	pplicable)			
all photograp		l reproduction (electronically me in any form whatsoever fo Program Competitive Event.		
	o granted for any printed ma ograph(s) and with the use of	atter, video, or audio recording my name.	g used in conjunction	
I have read th otherwise.	is document and am fully aw	are of the content and implica	ations, legal and	
	on must be completed here and or national competition. Kaleb James Philbrick	l will also be required online if t	this event is submitted to a	
BPA website for	or national competition.	l will also be required online if t	this event is submitted to a	
BPA website for Name	or national competition. Kaleb James Philbrick	I will also be required online if the state of the state	this event is submitted to a  ZIP 43230	
BPA website for Name Address City	or national competition. Kaleb James Philbrick 4670 Lasky Ct. Columbus	State Ohio vided for the judges before you	ZIP 43230	