

RELEASE FORM

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.)

V03-5d-5

Event Name	Software Engineering learn
Member ID	Software Engineering learn 00015200
Team ID (if a	applicable) 58-0105-1
all photograp	sent irrevocably to the use and reproduction (electronically or in print) of any and ohs and other media taken of me in any form whatsoever for a Business Professionals Workplace Skills Assessment Program Competitive Event.
Consent is als	so granted for any printed matter, video, or audio recording used in conjunction ograph(s) and with the use of my name.
I have read th otherwise.	is document and am fully aware of the content and implications, legal and
This information BPA website for	on must be completed here and will also be required online if this event is submitted to a or national competition.
Name	Jeremiah Pfaff
Address	5600 West alexis 10 H5+ 10.1
City	Sylvania State Ohio ZIP 43560
A printed conv. x	with signature(s) must be provided for the judges before you present.
A printed copy v	with signature(s) mast be provided for an judget extent year provided
Signature	guerian Kraff
Date	1/13/22
Parental Verifi	
Signature of Pare	ent or Guardian
	or 18 years at age 1
	11 16 years of age.)
(If person is unde	16 years of age.)



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Event#

Member ID	
I hereby consent irrevocably to the use and reproduction (electronically or in print) of any an all photographs and other media taken of me in any form whatsoever for a Business Profession 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 and the substitution of the photograph of the provided for the judges before you present. Sity State Ohio ZIP 4356 Appendix State Ohio ZIP 4356 Appendix Of Parent or Guardian of Parent o	
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