2009-10 CONSENT, RELEASE, HOLD HARMLESS AND AUTHORIZATION TO REPRODUCE PHYSICAL LIKENESS

Program: FRC FTCFLL Jr.FLL			Team#
Role: O Mentor O Team Leader O Student This is a Consent and Release of Rights in favor Technology, and its officers, directors, employee managing, contracting, sponsoring, hosting, con print, publication, television, broadcast or video place, the FIRST LEGO® League ("FLL"), Juni Competition ("FRC") Events (the "FIRST Even volunteer involved in a FIRST event. In consider following:	of the United States Foundation last, and assigns ("FIRST"), as well ducting, evaluating or publicizing media) FIRST's programs ("FIRST LEGO League ("Jr.FL is"). As used below, "Participant	I as entities designated and approved to g (including individuals and entities wor ST's Cooperating Entities") including at L") FIRST Tech Challenge ("FTC"), ar " shall mean any individual, student, me	assist FIRST in thing with FIRST in any and all FIRST and FIRST Robotics tentor, teacher, or
I hereby grant to FIRST, to FIRST's Cooperating En otherwise digitally collect my likeness, voice and sour FIRST and the FIRST's Cooperating Entities to be we Entities all rights in these Works and the right to use and in all forms and for all purposes, including without any further consideration to me or any limital specific permission from his/her parent or guardian.	ds (as "Works") during my participal orks made for hire, and otherwise in or sublicense these Works and my nout limitation, advertising and other p	ation at the FIRST Event(s). I further acknowledge assign and grant to FIRST and to ame, likeness and biography, in FIRST's dispromotions for FIRST or the FIRST's Coop	nowledge the Works by FIRST's Cooperating scretion, in all media perating Entities,
There are risks inherent in participating in FIRS as well as in working with electrical connections the risk of bodily harm (including without limita Event, I hereby assume those risks. Except to Cooperating Entities, to the fullest extent po ACTION which I may now or hereafter hav in any FIRST Event, and I will indemnify at claims resulting from such participation.	traveling to and from events, are tion, death) and property damage the extent due to the gross negrinited by applicable laws, I are against FIRST and FIRST's	nd participating in public competitions. e. Being fully cognizant of the risks in gligence or willful misconduct of FI HEREBY WAIVE ANY CLAIMS O Cooperating Entities arising out of	These risks include participating in an RST or FIRST'S OR CAUSES OF my participation
I HEREBY RELEASE FIRST and FIRST's assigns from all claims, demands, liabilities, and any claims including, without limitation infringements or violations of personal or prand FIRST's Cooperating Entities arising in	damages, costs and expenses a, claims for compensation, de operty rights of any sort whats	s attorneys' fees, other professional f famation, or invasion of privacy, or e soever that I may now or hereafter h	ees and expenses, other
In the event I should sustain injuries or illness will Entities to administer, or cause to be administered the circumstances, to include treatment by a phy	ed, such first aid or other treatmen	nt and medications I may bring as may l	
This Release shall be binding upon my heirs, per laws of the State of New Hampshire, which shall parties hereto with respect to the subject matter of written or oral, with respect to such subject matter	be the venue for any legal action of this Release and supersedes an	. This Release constitutes the entire agr	reement among the
FIRST strongly believes in confidentiality of all conformation to any organization other than those personal contact information provided here as paguardian as part of its research, program evaluation	directly involved in the operation rt of its participant database and	and support of FIRST programs. FIRST to contact the FIRST participant and/o	ST will be using the r the participant's
Unless I check this box to remove my conser for <i>FIRST</i> 's research, program evaluation, alumn	it, I hereby grant to FIRST the rig	ght to use the personal contact informatic	ion provided here
I understand that this form involves a release of			
Participant Name [Print Clearly]	articipant Signature	Date	
Address:	City:	State:	Zip:
Phone: Home ()			
Gender:(M) (F) Race (optional) [Please check one]: O African-Am Ethnicity (optional): O Hispanic O Non-His		Date: Year: O Native American/Alaskan O White	O Multiple races
For Participants under the age of eighteen (18) years Guardian of			
refer to said minor.			
Parent or Legal Guardian Signature	Print I	Parent or Guardian Name	