

Photographic Release Form

I hereby grant the Central Susquehanna Intermediate administration permission to photograph/videotape n	
	publish it and identify him/her
(print participant's name)	
while he/she is participating in the CSIU-sponsored ST name, I understand that forms of publication may included as CSIU website, social media, publications and processing the process of the control of	ude regional news media outlets, as
Furthermore, I understand that I do not have to grant to fully participate in the competitions	permission and that I will still be able
Participant's Name (please print)	Date
Calcal	District
School	District
Participant's Signature	_

Please return this form to the presenter prior to the start of the event.