

2024 National TSA Conference

AUTHORIZATION, WAIVER, AND RELEASE FORM



This form is required of all minors and adults who attend the national TSA conference. Copies of this completed form are to be retained and brought to the conference by the minor's parents, chapter advisors and/or state advisors. It is the responsibility of the chapter advisor to make sure there is a completed form for each participant and to give a copy to their state advisor prior to the conference if requested by the state advisor. National TSA reserves the right to request a completed copy of this form at any time from the chapter advisor or state advisor. Do not send this form to the national TSA office.

AUTHORIZATION

As used below, TSA shall mean the Technology Student Association, Inc. and its officers, directors, employees, assigns, and agents (including any third party designated and approved by TSA) at any time, including, without limitation, individuals or entities involved in print, publication, television, broadcast, or video media. As used below, "Participant" shall mean any individual, student, advisor, teacher, or volunteer involved in a TSA activity. The participant in any TSA program, meeting, or conference (collectively, the "Event"), agrees to the following:

I hereby grant to TSA the right to photograph and/or videotape me during my participation in an Event. I further grant to TSA, forever and throughout the world, the right to use these photographs and videotapes of my likeness, voice and sounds during my participation, and to reuse or license the right to such photographs and videotapes of my participation, and my name, likeness and biography, as TSA may desire, in all media and in all forms and for all purposes, including without limitation, advertising and other promotions for TSA, without compensation to me or any limitation whatsoever. In granting this license, I understand that TSA is not under any obligation to exercise any of their rights, licenses and privileges herein granted. Each such photograph and videotape shall be a work for hire and TSA shall be deemed the owner of any copyright and/or trademark rights therein (and all applications, registrations and renewals resulting therefrom). If, however, the work is deemed not to be a work made for hire by a court of competent jurisdiction, then the foregoing grant shall constitute my irrevocable assignment of the worldwide copyright in the work to TSA. It is a TSA policy not to print a minor's picture accompanied by his/her name unless TSA has obtained specific permission from his/her parent or guardian.

ASSUMPTION OF RISK AND WAIVER

The undersigned being fully cognizant of the risks in participating in an Event, hereby assumes the risks of bodily injury (including, without limitation, death) and property damage, inherent in such participation. Except to the extent due to the gross negligence or willful misconduct of TSA, to the fullest extent permitted by applicable laws, I hereby waive any claims or causes of action which I may now or forever have against TSA arising out of my participation, and I will indemnify and hold harmless TSA against any and all claims resulting from such participation.

RELEASE

I hereby release TSA and its respective successors, affiliates, licensees and assigns from all claims, demands, liabilities, damages, costs and expenses (including, without limitation, attorney's and other professional fees and expenses) that I may now or ever have against TSA arising in connection with my participation in the Event and TSA's exercise of rights hereby granted, including, without limitation, claims for compensation, defamation, or invasion of privacy, or other infringements or violations of personal or property rights of any sort. In the event I should sustain injuries or illness while involved in an Event, I hereby authorize TSA to administer, or cause to be administered, such first aid or other treatment and medications as may be necessary under the circumstances, to include treatment by a physician or hospital of TSA's choice.

This Release shall be binding upon my heirs, personal representatives, and assigns, and me and shall be governed by and construed under the laws of the Commonwealth of Virginia without regard to conflicts of laws principles. Venue for any legal action arising out of or in connection with this Release shall be in Fairfax County, Virginia. This release constitutes the entire agreement among the parties hereto with respect to the subject matter of this Release and supersedes any and all previous agreements among the parties, whether written or oral, with respect to such subject matter. I understand that this form involves a release of legal rights. The parent or guardian signing below agrees to all of the foregoing terms on behalf of the minor signing below.

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Participant's Name: _____

Participant's Signature: _____

School: _____

Allergies: _____

Age: _____

Current Medication: _____

History of heart condition, diabetes, asthma, etc: _____

Physician's Name: _____

Physician's Telephone: _____

Insurance Company: _____

Policy Number: _____

Parent/Guardian's Name: _____

Parent/Guardian's Signature: _____

Home Address: _____

City, State Zip: _____

Parent/Guardian's Home Phone: _____

Parent/Guardian's Cell Phone: _____

Parent/Guardian's Email: _____

Date: _____