PUBLICITY WAIVER

I, ____________________________________________________________, principal of
(Name) [Please print]
________________________________________________________________________,
(School Name)
give Millersville University and the Central Regional Science Olympiad permission to take
photos or videos of all attendees from our school, including: students, coaches, and parents, and
to use the photos so taken on the date noted below for publicity purposes for either Millersville
University and/or the Central Regional Science Olympiad.

By this authorization, I understand and agree that no participant shall receive remuneration and
that all rights, title and interest to the photos and use of them belongs to Millersville University.

I understand that it is my responsibility to inform all participants and their legal guardians of this
agreement.

I also understand that members of the press may request interviews with attendees, and that the
attendees have the right to decline such interviews. This agreement is in effect for March 19,
2016 for the Central Regional Science Olympiad competition held at Millersville University.

_______________________________________________
Signature of School Principal
_______________________________________________
Date

This form must be brought to the competition on March 19, 2016.