

CONSENT, RELEASE, HOLD HARMLESS AND AUTHORIZATION TO REPRODUCE PHYSICAL LIKENESS

Date: _____

Team Name: _____

School Name: _____

Role: Coach/Mentor Team Leader (Adult) Student Participant Volunteer

This is a Consent and Release of Rights in favor of the Appalachian Ohio Manufacturers' Coalition (AOMC), as well as entities designated and approved to assist AOMC in managing, contracting, sponsoring, hosting, conducting, evaluating or publicizing (including individuals and entities working with AOMC in print, publication, television, broadcast or video media) AOMC's programs ("AOMC's Cooperating Entities"). As used below, "Participant" shall mean any individual, student, coach/mentor, teacher, or volunteer involved in an AOMC event. In consideration of the acceptance of my participation in one or more AOMC Events, I agree to the following:

I hereby grant to AOMC, to AOMC's Cooperating Entities, and to the press and media admitted into AOMC Events the right to photograph, videotape, or otherwise digitally collect my likeness, voice and sounds (as "Works") during my participation at the AOMC Event(s). I further acknowledge the Works by AOMC and the AOMC's Cooperating Entities to be works made for hire, and otherwise irrevocably assign and grant to AOMC and to AOMC's Cooperating Entities all rights in these Works and the right to use or sublicense these Works and my name, likeness and biography, in AOMC's discretion, in all media and in all forms and for all purposes, including without limitation, advertising and other promotions for AOMC or the AOMC's Cooperating Entities, without any further consideration to me or any limitation whatsoever.

There are risks inherent in participating in AOMC Events, including the risks inherent in the construction of robots as well as in working with electrical connections, traveling to and from events, and participating in public competitions. These risks include the risk of bodily harm (including without limitation, death) and property damage. Being fully cognizant of the risks in participating in an Event, I hereby assume those risks. **Except to the extent due to the gross negligence or willful misconduct of AOMC or AOMC's Cooperating Entities, to the fullest extent permitted by applicable laws, I HEREBY WAIVE ANY CLAIMS OR CAUSES OF ACTION which I may now or hereafter have against AOMC and AOMC's Cooperating Entities arising out of my participation in any AOMC Event, and I will indemnify and hold harmless AOMC and AOMC's Cooperating Entities against any and all claims resulting from such participation.**

I HEREBY RELEASE AOMC and AOMC's Cooperating Entities and their respective successors, affiliates, licensees and assigns from all claims, demands, liabilities, damages, costs and expenses attorneys' fees, other professional fees and expenses, and any claims including, without limitation, claims for compensation, defamation, or invasion of privacy, or other infringements or violations of personal or property rights of any sort whatsoever that I may now or hereafter have against AOMC and AOMC's Cooperating Entities arising in connection with my participation in any AOMC Event.

In the event I should sustain injuries or illness while involved in an AOMC Event, I hereby authorize AOMC and AOMC's Cooperating Entities to administer, or cause to be administered, such AOMC aid or other treatment and medications I may bring as may be necessary under the circumstances, to include treatment by a physician or hospital of AOMC's or AOMC's Cooperating Entities' 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 State of Ohio, which shall be the venue for any legal action. 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.

AOMC strongly believes in confidentiality of all contact information. AOMC will be using the personal contact information provided here as part of its participant database and to contact the AOMC participant and/or the participant's guardian as part of its research, program evaluation, or alumni outreach efforts, or other related outreach activities as they may occur.

Unless I check this box to remove my consent, I hereby grant to AOMC the right to use the personal contact information provided here for AOMC's research, program evaluation, alumni efforts and/or other outreach activities and to share this information with those associated with the AOMC programs.

I understand that this form involves a release of legal rights.

Participant Name Participant Signature Date

Address: _____ City: _____ State: _____

Zip: _____ Phone: (_____) _____ Email address: _____

Age: _____ Gender: _____ (M) _____ (F) Grade: _____

Race[check one]: African-American Asian/Pacific Islander Hispanic Native American/Alaskan White Multiple races

For Participants under the age of eighteen (18) years listed above: I hereby consent and agree to the above as the Parent/Legal Guardian

of _____(printed minor's name), in which case "I", "me" and "my" as used herein shall refer to said minor.

Parent or Legal Guardian Signature

Print CLEARLY Parent or Guardian Name