

THE UNIVERSITY OF TEXAS AT AUSTIN
UNIVERSITY INTERSCHOLASTIC LEAGUE

COACH PHOTOGRAPHIC CONSENT AND RELEASE CERTIFICATION FORM

School _____
Address _____
City/Zip _____
Superintendent _____
Principal _____

Check Sport:

Team Tennis Boys Soccer
Volleyball Girls Soccer
Girls Basketball Softball
Boys Basketball Baseball

I hereby certify to the University of Texas at Austin and the University Interscholastic League (University), and those acting in pursuant to its authority the following:

- (a) Upon qualifying for the UIL state championship event of the above checked sport, I have distributed to and received back from the students representing my school team, completed copies of the UIL Photographic Consent and Release Form.
- (b) The students representing my school team have given (or their parent/guardian has given) consent for the UIL to use, reproduce, exhibit or distribute in any medium their image in conjunction with the UIL state championship event.
- (c) The team photo provided to the UIL for use in the state championship event program contains only those students whose image is not protected under the Family Educational Rights and Privacy Act (FERPA).
- (d) If a student representing my school team wishes to not have their image used in the UIL state tournament program or in conjunction with the UIL state championship event, I have included their name(s) and jersey number (if applicable) below.

Print Name

Coach's signature

Date

Coach's Phone (include area code)

School Phone

The following student(s) have not consented to have their image used by the UIL in any medium in conjunction with the UIL state championship event checked above. (List name and jersey number if applicable.) I understand that their image will not be included in the UIL state championship event program.

FILING: This form must be received in the UIL office no later than noon on the Monday prior to the UIL State Championship event in which your team is participating.

FAX TO: 512-471-6589