THE UNIVERSITY OF TEXAS AT AUSTIN UNIVERSITY INTERSCHOLASTIC LEAGUE

COACH PHOTOGRAPHIC CONSENT AND RELEASE CERTIFICATION FORM

School	Check Sport:	Football
Address	Team Tennis	Boys Soccer
City/Zip	Volleyball	Girls Soccer
Superintendent	Girls Basketball	Softball
Principal	Boys Basketball	Baseball
I hereby certify to the University of Texas at Austin (University), and those acting in pursuant to its auth (a) Upon qualifying for the UIL state champ have distributed to and received back fro completed copies of the UIL Photograph (b) The students representing my school tear given) consent for the UIL to use, reprod image in conjunction with the UIL state (c) The team photo provided to the UIL for contains only those students whose image Educational Rights and Privacy Act (FEI	ority the following: sionship event of the above on the students representing ic Consent and Release Form have given (or their paraluce, exhibit or distribute in championship event. use in the state champions the is not protected under the RPA).	e checked sport, I ng my school team, orm. ent/guardian has n any medium their hip event program the Family
(d) If a student representing my school team UIL state tournament program or in conj event, I have included their name(s) and	unction with the UIL state	championship
Print Name		
Coach's signature	Date	
Coach's Cell (include area code)	School Phone	
The following student(s) have not consented to have their image u UIL state championship event checked above. (List name and jer- will not be included in the UIL state championship event program	sey number if applicable.) I und	n conjunction with the erstand that their image

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

FAX TO: (512) 471-6589