

## **Video Release**

I,, agree to be photographed and videotaped for this production by <b>Top Prospect Video Productions, LLC</b> without receiving compensation of any kind. I understand that this footage may be used, as deemed appropriate by <b>Top Prospect Video Productions, LLC</b> , for future productions which may be viewed by public and private sector audiences.	
Injury Waiver	
I,, hereby accept sole responsibility for any personal injury I incur during the course of this production by <b>Top Prospect Video Productions</b> , <b>LLC</b> . I acknowledge that participation in the production exposes me to potential risks and I release all employees of any and all liabilities regarding my injury. I shall not now or in the future prosecute any suit against <b>Top Prospect Video Productions</b> , <b>LLC</b> and/or its officers. This agreement will be legally binding on me, my spouse, my heirs and my descendants.	
General Release	
I,, understand that the product by <b>Top Prospect Video Productions, LLC</b> is not a guarantee of scholarship or financial restitution from a higher education establishment. I also ensure that any information provided by me to <b>Top Prospect Video Productions, LLC</b> is accurate to the best of my knowledge and I will be held responsible if information is inaccurate.	
Please fill in following information to the best of your knowledge	
Height: Weight: High Scho	ool Graduation Year:
GPA: SAT and/or ACT scores:	
Total Points:Goals: Assists:	Position(s):
Other Relevant Stats: Accola	des:
I read and understand the Video Release, Injury Waiver, and 0	General Release Form.
If athlete is under 18: I, the individual named above, and I have read this release and	, am the parent/legal guardian of approve of its terms.
Print Athlete's Name and School	
Athlete or Parent/Legal Guardian Signature	Date