



COMPETITION RELEASE FORM

2009 Kansas Academic Decathlon

Hosted by: Kansas State University

Please type or print. Copy this form and complete one for each student.

Student's Name: _____ **Grade:** _____

High School: _____

Home Address: _____
(Street Address, City, State and Zip)

Home Phone: _____

I hereby request participation in the Kansas Academic Decathlon, held at Kansas State University, Manhattan, Kansas, on January 30-31, 2009. I agree to abide by all rules of conduct. My parent/guardian and I, whose signatures are shown below, agree to follow the competition rules and to accept the interpretations and decisions made by the competition manager. My parent/guardian and I do hereby release from all responsibility or liability Kansas State University and the Kansas Academic Decathlon Board of Directors and hold them harmless for any incident or injury which may occur before, during, or following such competition. We further consent to the release of information about, or relative to, my participation in the competition activities, including scores, photographs, sound and video recordings, and any other data. The Kansas Academic Decathlon will have full rights to reproduction and use of all such materials.

Signature of Student _____
Date

Signature of Parent/Guardian _____
Date

****For Coaches Use Only****

As a coach at _____, I hereby indicate that the above named student meets the Academic Decathlon requirements for the following category:

Team Member: Honors _____ Scholastic _____ Varsity _____

Alternate: Honors _____ Scholastic _____ Varsity _____

Signature of Coach _____
Date

Please attach the Student's Transcript to this form and return on or before the competition.
EACH STUDENT MUST HAVE A SIGNED WAIVER TO BE ELIGIBLE FOR PARTICIPATION.
TO: Kansas Academic Decathlon
c/o Kansas State University - Office of Student Life
102 Holton Hall
Manhattan, KS 66506-1303
Office: 785-532-6432
Fax: 785-532-5307