## Youth Apps Challenge Release Form Youth Challenge STUDENT INFORMATION Name: Grade: \_\_\_\_\_ Address: Student Email: Parent/Guardian Name(s): Parent Phone: Parent Email: **SCHOOL Info:** School Name: **Garfield High School** Teacher Name: Earl Bergquist Teacher Phone: 206-252-2424 Teacher Email: embergquist@seattleschools.org **APP CHALLENGE ENTRY** Title of Entry: Description: **Originality Certification** I hereby certify that, to the best of my knowledge, the app described above is an original work of authorship by the undersigned student and that it is not copied from, nor does it include, any other person's copyrighted work. Student Signature Teacher (or Adult Sponsor) Signature App Release We, the undersigned, represent that the app entry described above is an original work of authorship personally created by the undersigned student to which the student is entitled copyright protection. In consideration for the acceptance of the app entry into the Youth Apps Challenge, the undersigned grant the Technology Alliance the right to publicly display the app entry, if it is selected for display, in accordance with the rules of the App Challenge, for a period of one year from the latest date on this form. The undersigned acknowledge that the final decision regarding the suitability and eligibility will be governed by the rules and regulations of the contest rules issued by the Technology Alliance. The undersigned also grant the Technology Alliance, their employees and agents, the right to use or publicize the entry for any non-commercial purpose. The undersigned further agrees to indemnify, hold harmless and defend the Technology Alliance employees and agents against any and all claims of any nature whatsoever, including, but not limited to, claims of copyright infringement, by any party whatsoever, arising out of or in any way related to the submission of the app entry in the App Challenge. Student Signature

Parent/Guardian Signature (if under 18)\_\_\_\_\_