

PUBLICITY RELEASE and LIABILITY WAIVER

In consideration for my participation in the USTA Tennis Activity on the date(s) and location(s) listed below, I agree to be filmed and/or photographed by The United States Tennis Association ("USTA") in connection with such participation and that the USTA will own any and all rights in such film and photography of me (hereinafter referred to as "Footage").

This will permit the USTA to proceed with taking such Footage and I now waive, as to the USTA and its successors, assigns and licensees, all personal right and objections to any use to be made of me, my name, likeness, voice or personality in connection with the use of the Footage in any media for any and all purposes, including trade, advertising and promotional purposes, in perpetuity and without further compensation. I understand that in proceeding with filming and photography of the Footage, the USTA will do so in full reliance on the foregoing permission.

I FURTHER ACKNOWLEDGE THAT MY PARTICIPATION IN THE ACTIVITY INVOLVES A RISK OF INJURY, INCLUDING BODILY INJURY. I, ON BEHALF OF MYSELF AND MY HEIRS AND LEGAL REPRESENTATIVES, AGREE TO RELEASE AND DISCHARGE TO THE FULLEST EXTENT PERMITTED BY LAW THE USTA, ITS OFFICERS, DIRECTORS, EMPLOYEES AND AGENTS OF AND FROM ANY AND ALL LIABILITY FOR ANY LOSS, DAMAGE, INJURY OR EXPENSE THAT I MAY SUFFER OR SUSTAIN, BY NEGLIGENCE OR OTHERWISE, IN CONNECTION WITH MY PARTICIPATION IN THE ACTIVITY.

Name of USTA Activity:	
Dates:	
Location(s):	
SIGNATURE:	_ DATE:
PRINT NAME HERE:	
ADDRESS:	
E-MAIL:	
HOME/CELL PHONE:	
Signature of Parent or Guardian (if under 18):	
Please send me additional information about USTA	programs and/or events.