DISTRICT COPY

ROTARY DISTRICT 6670
FOUR-WAY TEST SPEECH COMPETITION RELEASE FORM

As a participant in the Rotary Four-Way Test Speech Contest, **Sunday, February 22, 2026,** at Wright State University, I understand that photographs may be taken throughout the day, and a video recording may be made of the four finalists' presentations either at the **February 22, 2026**, Contest or at the District Conference in April. With this form, Approval and Consent is given to Rotary District 6670, its member clubs and all members thereof to use a reproduction of my presentation for education, training of future participants, or for goodwill in the community.

Also, I understand that my email address may be shared with Wright State University, allowing it to contact me following the District event.

This form must be signed by all finalists before there will be any reproduction or release of this recording for any purpose listed above.

I have received a copy of this Release Form.

_____ _____

Student Contestant Date

_____ _____

Parent or Guardian (if Student is under 18) Date

STUDENT COPY

ROTARY DISTRICT 6670
FOUR-WAY TEST SPEECH COMPETITION RELEASE FORM

As a participant in the Rotary Four-Way Test Speech Contest, **Sunday, February 22, 2026**, at Wright State University, I understand that photographs may be taken throughout the day, and a video recording may be made of the four finalists' presentations either at the **February 22, 2026**, Contest or at the District Conference in April. With this form, Approval and Consent is given to Rotary District 6670, its member clubs and all members thereof to use a reproduction of my presentation for education, training of future participants, or for goodwill in the community. Also, I understand that my email address may be shared with Wright State University, allowing it to contact me following the District event.

This form must be signed by all finalists before there will be any reproduction or release of this recording for any purpose listed above.

I have received a copy of this Release Form.

_____ _____

Student Contestant Date

_____ _____

Parent or Guardian (if Student is under 18) Date