North American Intercollegiate Dairy Challenge – Southern Regional
Hosted by North Carolina State University
November 16 - 18, 2014 — Salisbury, North Carolina

Authorization for Personal Information Release

Return to NAIDC by October 31, 2014

In consideration of the **North American Intercollegiate Dairy Challenge** requiring involvement in student and sponsor activities as part of the participation in the **North American Intercollegiate Dairy Challenge** activities, I, the undersigned, agree as follows:

Provide the Following Personal Information

Participant Name: _____

Campus Address: _____

City/State/Zip: _____

Telephone:_____

E-Mail: _____

School:_____

Major:_____

Coach _____

Expected Graduation Date: _____

Career Goals (Industry & Position): _____

Parties Authorized to Have Access to Personal Information.

To accomplish our goals, **North American Intercollegiate Dairy Challenge** provides participant personal information to its sponsors, other participants and the national contest management committees. This information will be supplied at the contest event and will not be supplied to any other parties. In addition photos and news releases may be sent to the media (newspaper, radio, television and the internet) or used in informational brochures or videos by **North American Intercollegiate Dairy Challenge.**

It is the right of the individual whether or not to consent
to the use of his/her name and contact information, and/or photos.

Authorization for Personal Information Release

I hereby authorize **North American Intercollegiate Dairy Challenge** to use my personal contact information for only the authorized parties listed above and/or any photos taken of me during the **North American Intercollegiate Dairy Challenge** activities.

_____   _____

Participant (Signature)   *Date*

_____

Participant (Please Print Clearly)

_____

Participant's School (Please Print Clearly)