School Participation Waiver Form

Event Details:

- Event Name: Guam Videos Lip Dub Challenge 2026
- Promotional Period: From January 06 to February 22, 2026.
- Location: School Campuses

Consent and Release:

I, the undersigned administrator of [School Name) _____, hereby confirm the school's participation in the Lip Dub event for the duration of January 06 to February 22, 2026. We understand and agree to the following terms and conditions:

1. **Media Release:** The school grants the event organizers the right to use, reproduce, and distribute any photographs, video recordings, or audio recordings taken during the Lip Dub event for promotional and educational purposes.
2. **Liability Waiver:** The school acknowledges that participation in the Lip Dub event involves inherent risks and hazards. The school releases and holds harmless the event organizers, sponsors, and affiliated entities from any liability for injuries or damages that may occur during or as a result of the event.
3. **Compliance with Rules:** The school agrees to ensure that all participating students adhere to the rules and guidelines set forth by the event organizers during the Lip Dub Challenge 2024 event and its promotional period.
4. **Emergency Medical Treatment:** The school is authorized to seek emergency medical treatment for participating students in the event of an emergency. Thrive Media Group, its partners, sponsors, and affiliates shall be held harmless and indemnified from any legal or financial obligations arising from actions taken pursuant to this section.
5. **Right to Refuse Participation:** The school acknowledges that Thrive Media Group and its affiliates reserve the right to refuse participation to any school(s) or participants not complying with the rules or behaving in a manner deemed inappropriate.

School Information:

School Name: _____

Senior Class President:

Name: _____

Contact Number: _____

Administrator Information:

Full Name of Administrator: _____

Title/Position: _____

Administrator's Signature: _____

Date: _____

****Email completed form to thrivemediaguam@gmail.com by January 09, 2026****