



Geek Squad Academy Permission and Participant Release Form

Name of Parent or Guardian: _____

Name of Child: _____

Day Contact Number(s) for Parent or Guardian: _____

Evening Contact Number(s) for Parent or Guardian: _____

Emergency contact & Phone number: _____

Geek Squad Academy Date(s): Month, Day, Year, Time: _____

Geek Squad Academy Location (Facility Name): _____

Geek Squad Academy Organizer (Sponsor): _____

PLEASE INFORM the Geek Squad Academy Organizer of any special instructions related to the Child (e.g., food or bee-sting allergies, necessary medical needs, etc.):

As the undersigned, I hereby:

- Represent and warrant that I am the legal parent or guardian of the Child, referenced above, and that I have the right to contract in my own name and on the Child’s behalf.
- Give my permission for my Child to participate in the Geek Squad Academy, including accessing the internet and web sites on the internet. The Geek Squad Academy will be held at the location and the dates indicated above, and I acknowledge that my Child will not be provided transportation to or from Geek Squad Academy and that I am solely responsible for providing transportation for my Child, unless provided by the Geek Squad Academy Organizer.
- Give Best Buy and Geek Squad Academy Organizer, permission to record photographic, video and/or audio media of my Child during his/her participation in the Geek Squad Academy. I also acknowledge and agree that Best Buy and Geek Squad Academy Organizer may collect survey responses, notes or other data about my Child’s participation in Geek Squad Academy and unconditionally grant to Best Buy and Geek Squad Academy Organizer, and their present and future parent company and affiliates, representatives and licensees, the right and permission to use the name and likeness of the Child, as well as any survey feedback, ideas, opinions, data, written notes and impressions provided by the Child during the Geek Squad Academy for purposes of promoting or improving the Geek Squad Academy.
- Acknowledge and agree that Geek Squad Academy Organizer is not responsible for administering any medical care to my Child.

See signature lines on page 2

To contact Best Buy directly about this Geek Squad Academy, please contact:
academy@geeksquad.com.

[Additional Release Terms on Following Page]

Release

In consideration for having my or my child's name, photograph, video/film footage, voice, sound and any other form of visual or sound reproduction, or likeness ("Images and Sounds") considered for inclusion in Geek Squad Academy promotional material, the sufficiency of which is acknowledged and agreed, I agree as follows ("Release"):

- I grant to Geek Squad Academy organizers and Best Buy Purchasing LLC, its parent, subsidiaries and affiliates ("Best Buy") and its assignees, successors and licensees permission to take and use the Images and Sounds and to use my or my child's name in connection with them.
- I agree that Best Buy owns all Images and Sounds it takes of me or my child, and I waive any and all interest in the Images and Sounds. I also agree that Best Buy has all rights of ownership to the Images and Sounds including the right to use, re-use, publish, re-publish, retouch, reproduce, manipulate and change the Images and Sounds and to use the Images and Sounds with or without my name or my child's name. If I or my Child give any written statement about the Geek Squad Academy, I agree that it is accurate and that Geek Squad Academy may use it as a testimonial. If I receive any copies, prints or negatives of the Images and Sounds, I agree not to authorize anyone else the right to use them.
- I agree that Geek Squad Academy Organizer owns all images it takes of me or my child and I waive any and all interest in the Images and Sounds. I also agree that Geek Squad Academy Organizer has all rights of ownership to the Images and Sounds including the right to use, re-use, publish, re-publish, retouch, reproduce, manipulate and change the Images and Sounds and to use the Images and Sounds with or without my name or my child's name.. If I or my Child give any written statement about the Geek Squad Academy, I agree that it is accurate and that the Geek Squad Academy Organizer may use it as a testimonial. If I receive any copies, prints or negatives of the Images and Sounds, I agree not to authorize anyone else the right to use them.
- I agree that Best Buy's ownership or Geek Squad Academy Organizer's ownership gives it the right to use the Images and Sounds, throughout the world, for any purpose related to promotion of the Geek Squad Academy, including without limitation, the following: advertising, print media, audio visual media, internet media, annual reports, S.E.C. filings, internal communications, press releases and any other medium, anywhere in the world for a period of fifteen years.
- I agree that neither Best Buy nor Geek Squad Academy Organizer have to submit the Images and Sounds to me for inspection or approval and that neither are or will be liable to me for anything in connection with use of the Images and Sounds.
- I represent and warrant that the rights I am granting to Best Buy and/or Geek Squad Academy Organizers do not conflict with any other agreements, restrictions or commitments I have; that I have read and understand the terms of this Release.
- I agree that the consideration I have received is in full payment for the rights I have granted to Best Buy and/or Geek Squad Academy Organizer, and that neither Best Buy nor Geek Squad Academy Organizer have any obligation to pay me anything else for its use of the Images and Sounds.

For persons younger than 21 years of age, the parent or legal guardian must complete the following:

I represent and warrant that I am the parent or legal guardian (circle one) of the minor model named above, I have the right to contract on the minor's behalf, without obtaining the consent or approval of any other party; I have read this Release and understand it. I release Best Buy and Geek Squad Academy Organizer of any liability arising out of the exercise of the rights granted by the above Release.

Parent or Guardian's Printed name: _____ Date: _____

Signature: _____ Address: _____

Witness: _____