

SPARTAN PLEDGE CHALLENGE  
VIDEO RELEASE FORM

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There is no time limit on the validity of this release nor is there any geographic limitation on where these materials may be distributed. This release applies only to photographic, audio or video recordings collected as part of the "Spartan Pledge Challenge".

By signing this release, I acknowledge that I have completely read and fully understand the above release and agree to be bound thereby. I hereby release any and all claims against SpartanSword.org, its organizers and/or representatives.

Full Name (please print): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Phone: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**SPARTAN SWORD PLEDGE**  
I will not take my own life by my own hand without talking to my Battle Buddy first. My Mission is to find a Mission to help my Warfighter family.



**NEED TO TALK NOW?**  
Call Vets4Warriors at **1-855-838-8255**



I will not take my life until I talk to my partner first! My mission is to serve my community and to always look out for my brothers and sisters.

**SPARTAN AXE PLEDGE**

**NEED TO TALK NOW?**  
Call Safe Call Now at **1-877-230-6060**