



NASA Media Release for Adults
(Do Not Use for Minors)

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(Please print your name)

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I understand and agree that the text, photographs, and/or videotapes thereof containing my name, likeness, and voice, including transcripts thereof, may be used in the production of instructional, promotional materials, and for other purposes that NASA deems appropriate and that such materials may be distributed to the public and displayed publicly one or more times and in different formats, including but not limited to, websites, cablecasting, broadcasting, and other forms of transmission to the public. I also understand that this permission to use the text, photographs, videotapes, and name in such material is not limited in time and that I will not receive any compensation for granting this permission.

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I hereby unconditionally release NASA and its representatives from any and all claims and demands arising out of the activities authorized under the terms of this agreement.

By signing below, I represent that I am of legal age, have full legal capacity, and agree that I will not revoke or deny this agreement at any time.

I have read the foregoing and fully understand its contents.

Accepted by:

Signature: [Signature] Date: 13/03/23

Name and Location of Event: IVSS

Address: _____

Telephone: +56995810920

Email Address: poangoje@gmail.com

MEDIA RELEASE

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psangoye@gmail.com

V.110, La Rivera, Amber 103 P. Huppert

13/03/23.



NASA Media Release for Parent and Minor

I, Denisse Alejandra Soto Hidalgo, am the parent/guardian/legal representative of
(Please print your name)
Agustina Ignacia Sanchez Soto and do hereby give permission
(Please print name of child)

for the above-named minor child (hereinafter "Minor") to be interviewed, photographed and/or videotaped by NASA or its representatives. I understand and agree that the text, photographs, and/or videotapes containing the words, image and/or voice of the Minor may be used in the production of instructional and/or promotional materials produced by or on behalf of NASA (hereinafter the "Program") and that such materials may be distributed or broadcast to the public and displayed publicly. I also understand that my permission to use the text, photographs and videotapes is for an unlimited duration and that neither I nor the Minor will receive any compensation for granting this permission or for the use, if any, by NASA of the Minor's words, image and/or voice.

I acknowledge that NASA has no obligation to use the Minor's words, image or voice in connection with the Program.

I hereby unconditionally release NASA and its representatives from any and all claims and demands arising out of the activities authorized under the terms of this agreement.

By signing below, I represent that I am at least 18 years of age and am the parent/guardian/legal representative of the above-named Minor. I have read the foregoing agreement and am familiar with all of the terms and conditions thereof and I consent to its execution by the Minor. I agree that neither I nor the Minor will revoke or disaffirm this agreement at any time.

Signature of Parent/Guardian/Legal Representative of Minor: _____

Relationship to Minor: Madre Date: _____

Signature of Minor: AS _____

Name and Location of Event: TUSS _____

Address: _____

Telephone: + 56 9 44 09 57 72 _____

Email: agustina.sanchez@mundiprofesores.cl _____

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Signature: [Signature]

Printed Name: [Signature]

Email Address: _____

Address: Villa La Rivera, Auber 103 Petrucci

Date: 13/05/23



**NASA Media Release for Adults
(Do Not Use for Minors)**

I, Pablo Godoy Jaravello, do hereby give permission to be
(Please print your name)

interviewed, photographed, and/or videotaped by NASA or its representatives in connection with a NASA production.

I understand and agree that the text, photographs, and/or videotapes thereof containing my name, likeness, and voice, including transcripts thereof, may be used in the production of instructional, promotional materials, and for other purposes that NASA deems appropriate and that such materials may be distributed to the public and displayed publicly one or more times and in different formats, including but not limited to, websites, cablecasting, broadcasting, and other forms of transmission to the public. I also understand that this permission to use the text, photographs, videotapes, and name in such material is not limited in time and that I will not receive any compensation for granting this permission.

I understand that NASA has no obligation to use my name, likeness, or voice in the materials it produces, but if NASA so decides to use them, I acknowledge that it may edit such materials. I hereby waive the right to inspect or approve any such use, either in advance or following distribution or display.

I hereby unconditionally release NASA and its representatives from any and all claims and demands arising out of the activities authorized under the terms of this agreement.

By signing below, I represent that I am of legal age, have full legal capacity, and agree that I will not revoke or deny this agreement at any time.

I have read the foregoing and fully understand its contents.

Accepted by:

Signature: [Signature] Date: 13/03/23

Name and Location of Event: IVSS

Address: Andres Bello 400 Pinar del Rio

Telephone: 569 962023259

Email Address: pablo.godoy@unimedpinar.com.cu

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Signature: [Signature]

Printed Name: _____

Email Address: 2060.godoy@unucor.org

Address: Andres Bello 406 Pittsburgh

Date: 13/03/23