

NASA Media Release Form for Parent or Guardian of Minor

Event name or description (reason for text, photographs, and/or video-recordings):

Event date(s):

March 5, 2025

I, the undersigned, am the parent or legal guardian or legal representative of the child named below, and I do hereby give permission for this minor child (hereinafter "Minor") to be interviewed, photographed, and/or video-recorded by NASA or its representatives in connection with a NASA production.

I understand and agree that the text, photographs, and/or video-recordings thereof containing the Minor's name, image, and voice, including transcripts thereof, may be used in the production of instructional and promotional materials produced by or on behalf of NASA 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 my permission to use the text, photographs, video-recordings, or name in such material is for an unlimited duration and that neither I nor the Minor will receive any compensation for granting this permission.

I acknowledge that NASA has no obligation to use the Minor's name, image, 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 domains arising out of the activities authorized under the terms of this agreement.

| Name of Minor (First and Last): |
|--|
| Tair Aljonabi |
| Name of Parent / Legal Guardian / Legal Representative of Minor (First and Last): |
| Signature of Parent / Legal Guardian / Legal Representative of Minor: |
| By signing your name below, you agree that you have read the foregoing and fully understand its contents. |
| A STATE OF THE PARTY OF THE PAR |
| Relationship to Minor: Mesther |
| Today's Date: 3-4-26 |
| Contact information for Parent / Legal Guardian / Legal Representative of Minor: |
| Address: 8044 Arnold St, Dearborn Heights, M 48127 |
| |
| Telephone: 313-980-1605 |
| Email Address: pasha. homaed. Bh@amail.com |



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| Name of Minor (First and Last): |
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| Iga Albektani |
| \mathcal{O} |
| Name of Parent / Legal Guardian / Legal Representative of Minor (First and Last): |
| Najlan Abdullah |
| Signature of Parent / Legal Guardian / Legal Representative of Minor: |
| By signing your name below, you agree that you have read the foregoing and fully understand its contents. |
| - Nasri |
| Relationship to Minor: More |
| Today's Date: Mark 4 |
| |
| Contact information for Parent / Legal Guardian / Legal Representative of Minor: |
| Address: 26225 Timber Trail |
| |
| Telephone: 313-358-6686 |
| Email Address: Najlaca 464 Qqmail 100m |



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| Event date(s): | | | | |
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| Name of Minor (First and Last): |
|---|
| Sarah Wazne |
| Name of Parent / Legal Guardian / Legal Representative of Minor (First and Last): |
| Hiba Saad |
| Signature of Parent / Legal Guardian / Legal Representative of Minor: |
| By signing your name below, you agree that you have read the foregoing and fully understand |
| its contents. |
| Relationship to Minor: Mother |
| Today's Date: 03/05/25 |
| Contact information for Parent / Legal Guardian / Legal Representative of Minor: |
| Address: 27103 Cecile Street |
| Telephone: 313-920-8798 |
| Email Address: hibawaz @ amail.com |



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| Name of Minor (First and Last): |
|--|
| Zanah Abdullussein |
| Name of Parent / Legal Guardian / Legal Representative of Minor (First and Last): |
| Signature of Parent / Legal Guardian / Legal Representative of Minor: |
| By signing your name below, you agree that you have read the foregoing and fully understand its contents. |
| Relationship to Minor: Wother |
| Today's Date: 3/4/25 |
| Contact information for Parent / Legal Guardian / Legal Representative of Minor: Address: 26238 West Street |
| Telephone: 586 -322 - 0241 |
| Email Address: Vasmin Jain Do) gmal. (Com |



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| Name of Minor (First and Last): |
|---|
| Ealat Haddad |
| Name of Parent / Legal Guardian / Legal Representative of Minor (First and Last): |
| Afran Asaad |
| Signature of Parent / Legal Guardian / Legal Representative of Minor: |
| By signing your name below, you agree that you have read the foregoing and fully understand its contents. |
| Relationship to Minor: Mother |
| Today's Date: Mary 2025 |
| Contact information for Parent / Legal Guardian / Legal Representative of Minor: |
| Address: 27171 Terrel Street, 48127, Dearborn Heights |
| MI |
| Telephone: 313 - 502 - 9455 |
| Email Address: All Marchagad 04 Qgmais. Com |