

## **NASA Media Release for Parent and Minor**

Luna San	
(Please print your name)	, am the parent/guardian/legal representative of
Deuyn Sasai	and do hereby give permission
(Please print name of child)	
videotaped by NASA or its representatives. I and/or videotapes containing the words, image production of instructional and/or promotional (hereinafter the "Program") and that such material and displayed publicly. I also understand the videotapes is for an unlimited duration and the	"Minor") to be interviewed, photographed and/or understand and agree that the text, photographs, ge and/or voice of the Minor may be used in the all materials produced by or on behalf of NASA terials may be distributed or broadcast to the public at my permission to use the text, photographs and nat neither I nor the Minor will receive any or for the use, if any, by NASA of the Minor's words,
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I hereby unconditionally release NASA and its demands arising out of the activities authoriz	s representatives from any and all claims and ed under the terms of this agreement.
representative of the above-named Minor. I h	st 18 years of age and am the parent/guardian/legal have read the foregoing agreement and am familiar and I consent to its execution by the Minor. I agree affirm the this agreement at any time.
Signature of Parent/Guardian/Legal Represer	ntative of Minor: Lynn Dasar
Relationship to Minor: Mom	Date: 1-24-23
Signature of Minor: Augu Source	
Name and Location of Event: Pacific Re	gional SRS 2023, Elkhorn Slowy
Address: 2448 Azalca Street	t
Telephone: 559 - 960 - 2378	
Email: Lynn. Sasai @ gmail. co	m
-	

### **MEDIA RELEASE**

Please Provide a Brief Description of the Image(s): headshots & data collection



Email Address:

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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: Date: 1 · 23 · 23
Name and Location of Event: Pacific Regional SRS 2023, Elkhorn Shugh
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Signature:  Printed Name:  Léyann Abdel Fattah  Email Address:  Luluabdel fattah@gmail.com  Address:  2220 Hillarest Street



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Accepted by:				
Signature: Nicolette Fierro	Date: <u>1-23-23</u>			
Name and Location of Event: Pacific Regional SRS 2	2023, Elkhomsbyh			
Address: 946 Hill Ave				
Telephone: 559-916-9471				
Email Address: <u>nicolette fierro 05@ iclaud.ce</u>	<b>/</b> ₩/			

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Printed Name: Nicolette Fiers
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Address: 946 Hill Ave
Date: 1-23-23