

(Please print your name)

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

) lice of a method of the parent/guardian/legal representative of

TSZabel 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 the this agreement at any time.
Signature of Parent/Guardian/Legal Representative of Minor.
Relationship to Minor: Nother Date:
Signature of Minor: 15 Zabell Wilson
Name and Location of Event: St Peter's High School Mans. OH
Address: 104 W 1st St Mans. OH 44902
Telephone: (not required)
Email: herishawilliams23@ gahoo.com



I,, am the parent/guardian/legal representative of (Please print your name)
Damien Walker 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.
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Signature of Parent/Guardian/Legal Representative of Minor:  Relationship to Minor:  Date:
Signature of Minor: Damien Walker
Name and Location of Event: St Peter's High School Mans. OH
Address: 104 W 1st St Mans. OH 44902
Telephone: (not required)
Email:



Edmiston , am the parent/guardian/legal representative of

( rodoo print your riamo)	
Daniel McGiolne	and do hereby give permission
(Please print name of child)	
or the above-named minor child (hereinafter "Minor") to videotaped by NASA or its representatives. I understand and/or videotapes containing the words, image and/or videotapes containing the words, image and/or videotapes containing the words, image and/or videotapes in the "Program") and that such materials may and displayed publicly. I also understand that my permisorate is for an unlimited duration and that neither I compensation for granting this permission or for the use mage and/or voice.	I and agree that the text, photographs, pice of the Minor may be used in the produced by or on behalf of NASA be distributed or broadcast to the publi ssion to use the text, photographs and nor the Minor will receive any
acknowledge that NASA has no obligation to use the M connection with the Program.	inor's words, image or voice in
hereby unconditionally release NASA and its represent demands arising out of the activities authorized under the	
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Signature of Parent/Guardian/Legal Representative of Mi	inor:
Relationship to Minor:	Date: 8 31 2Z
Signature of Minor: Dahle MFGUIP  Name and Location of Event: St Peter's High	School Mans OH
_	
Address: 104 W 1st St Mans. OH	44902
Telephone: (not required)	
Email: Stephanic-edmistoneyahur co	m



I, JOSHUA MCABE, am the parent/guardian/legal representative of (Please print your name)

GABRIEL MCABE	and do hereby give permission
(Please print name of child)	
for the above-named minor child (hereinafter "Minor") to videotaped by NASA or its representatives. I understan and/or videotapes containing the words, image and/or v production of instructional and/or promotional materials (hereinafter the "Program") and that such materials may and displayed publicly. I also understand that my perm videotapes is for an unlimited duration and that neither compensation for granting this permission or for the us image and/or voice.	d and agree that the text, photographs, oice of the Minor may be used in the produced by or on behalf of NASA be distributed or broadcast to the public ission to use the text, photographs and I nor the Minor will receive any
I acknowledge that NASA has no obligation to use the N connection with the Program.	linor's words, image or voice in
I hereby unconditionally release NASA and its represent demands arising out of the activities authorized under t	
By signing below, I represent that I am at least 18 years representative of the above-named Minor. I have read the with all of the terms and conditions thereof and I conseit that neither I nor the Minor will revoke or disaffirm the the	ne foregoing agreement and am familiar nt to its execution by the Minor. I agree
Signature of Parent/Guardian/Legal Representative of M	linor: July
Relationship to Minor: FATHER Signature of Minor: Glabriel McCabe	Date: 8/25/22
Name and Location of Event: St Peter's High	School Mans. OH
Address: 104 W 1st St Mans. Of	
Telephone: (not required)	
Email: JENP. MECABE @ GMAIL	COM



(Please print your name)	, am the parent/guardian/legal representative of
(Please print name of child)	and do hereby give permission
videotaped by NASA or its representatives. I u and/or videotapes containing the words, image production of instructional and/or promotional (hereinafter the "Program") and that such mate and displayed publicly. I also understand that videotapes is for an unlimited duration and that	materials produced by or on behalf of NASA rials may be distributed or broadcast to the public my permission to use the text, photographs and
I acknowledge that NASA has no obligation to connection with the Program.	use the Minor's words, image or voice in
I hereby unconditionally release NASA and its demands arising out of the activities authorize	
representative of the above-named Minor. I ha	18 years of age and am the parent/guardian/legal ve read the foregoing agreement and am familiar d I consent to its execution by the Minor. I agree firm the this agreement at any time.
Signature of Parent/Guardian/Legal Represent	CAM Off
	110 /
Relationship to Minor: OCO Mother	Date: 8 1241 7 3
Signature of Minor: Dominic S	toner
Name and Location of Event: St Peter	High School Mans. OH
Address: 104 W 1st St Mar	s. OH 44902
Telephone: (not required)	
Email:	



Telephone: (not required)

Email:

NASA Media Release for Parent and Minor
I,, am the parent/guardian/legal representative of (Plesse print your name)
(Please print name of child) and do hereby give permission
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 the this agreement at any time.
Signature of Parent/Guardian/Legal Representative of Minor:
Relationship to Minor: Mon (She told me to write that ) Date: 9-1-27
Signature of Minor: nasaan wigg ins
Name and Location of Event: St Peter's High School Mans. OH
Address: 104 W 1st St Mans. OH 44902



I, Analise Francis, am the parent/guardian/legal representative of (Please print your name)
Savana Francis 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.
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Signature of Parent/Guardian/Legal Representative of Minor: Analyse Francis & aprentice of Minor: Marie Francis & aprentice of Minor: Marie Minor: M



1, <u>Michelle Williams</u> , am the parent/guardian/legal representative of (Please print your name)		
Julianna William 5 and do hereby give permission whease print name of child)		
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Signature of Parent/Guardian/Legal Representative of Minor. Mucheles Wuis		
Relationship to Minor: Motter Date: 8/24/22		
Signature of Minor: Julianha Williams		
Name and Location of Event: St Peter's High School Mans. OH		
Address: 104 W 1st St Mans. OH 44902		
Telephone: (not required)		
Email: Mwilliams 7997 @ outlook, com		