

I, Mr. Seksan Tayarangsee	, am the parent/guardian/legal representative of
(Please print your name)	game and parents game and representation of
Mstr.Bhira Tayarangsee	and do hereby give permission
(Please print name of child)	
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 tha	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 of the activities authorized	representatives from any and all claims and dunder the terms of this agreement.
representative of the above-named Minor. $$ I have	18 years of age and am the parent/guardian/legal ve read the foregoing agreement and am familiar I I consent to its execution by the Minor. I agree irm the this agreement at any time.
Signature of Parent/Guardian/Legal Representa	itive of Minor:
	Date: 29/02/2024
Relationship to Minor: Father (Parents) Signature of Minor: Bhira Tayarangsee	
Name and Location of Event: Home	
Address: 90/2 Moo 4 Maehia , Muang Chi	angmai Thailand 50100
Telephone:	
Email: bhira05102@varee.ac.th	



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I, Kanyapat Sotnomtweepong	, am the parent/guardian/legal representative of
(Please print your name)	
Wichapat Sothorntweepong	and do hereby give permission
(Please print name of child)	
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	nderstand and agree that the text, photographs, and/or voice of the Minor may be used in the 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 authorized	
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 Representa	itive of Minor:
Signature of Parent/Guardian/Legal Representationship to Minor: mother(parents) Signature of Minor: Michapat Name and Location of Event: Globe Internation Address: 135 M.15 T.Yuwa A.Sanpathong	Date: 29/02/24
Signature of Minor: Wichapat	
Name and Location of Event: Globe Internation	onal Virtual Science Symposium
Address: 135 M.15 T.Yuwa A.Sanpathong	Chiangmai,Thailand 50120
Telephone:	
Email: Wichapat08713@varee.ac.th	



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, Urassaya Phommasoa	, am the parent/guardian/legal representative of
(Please print your name)	, par on a guar anamogan roprocontains o
Pimchanok Srisukha	and do hereby give permission
(Please print name of child)	
and displayed publicly. I also understand that revideotapes is for an unlimited duration and that	nderstand and agree that the text, photographs, and/or voice of the Minor may be used in the 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 use connection with the Program.	se the Minor's words, image or voice in
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representative of the above-named Minor. I have with all of the terms and conditions thereof and that neither I nor the Minor will revoke or disaffi	rm the this agreement at any time.
Signature of Parent/Guardian/Legal Representa	tive of Minor: ຈິ່ຽ້ ສັ່ນ ໂ
Signature of Parent/Guardian/Legal Representationship to Minor:	Date: 29/02/24
Signature of Minor:มิพัฒนา	
Name and Location of Event:	nai virtuai Science Symposium
Address: 200/175 T. Ton Pao A. San Kamp	phaeng Chiang Mai Thailand 50130
Telephone: 0937099559 Email: Pimchanok08340@varee.ac.th	
Email: Pimchanok08340@varee.ac.th	



Chomphunut Wiratkasem

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, am the parent/guardian/legal representative of
and do hereby give permission
linor") to be interviewed, photographed and/or inderstand and agree that the text, photographs, and/or voice of the Minor may be used in the 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 neither I nor the Minor will receive any or the use, if any, by NASA of the Minor's words,
se the Minor's words, image or voice in
epresentatives from any and all claims and under the terms of this agreement.
8 years of age and am the parent/guardian/legal re read the foregoing agreement and am familiar I consent to its execution by the Minor. I agree rm the this agreement at any time.
tive of Minor:
Date: 29/02/24
nal Virtual Science Symposium
ha Sala A.Muang Chiangmai , Thailand



, Somrawee Aramkul	, am the parent/guardian/legal representative of
(Please print your name)	, and the participant of the property of the property of the participant of the participa
Ekkawee Champrasert	and do hereby give permission
(Please print name of child)	and do not only give permission
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I acknowledge that NASA has no obligation to u connection with the Program.	se the Minor's words, image or voice in
I hereby unconditionally release NASA and its redemands arising out of the activities authorized	epresentatives from any and all claims and under the terms of this agreement.
By signing below, I represent that I am at least 1 representative of the above-named Minor. I hav with all of the terms and conditions thereof and that neither I nor the Minor will revoke or disaffic	e read the foregoing agreement and am familiar I consent to its execution by the Minor. I agree
Signature of Parent/Guardian/Legal Representat	ive of Minor:
Relationship to Minor: mother(parents)	Date: 29/02/24
Relationship to Minor: mother(parents) Signature of Minor:	
Name and Location of Event: Globe Internation	nal Virtual Science Symposium
Address: 333/164 No. 7, Mae Hia , Mueang	District, Chiang Mai 50100
Telephone:	
Email: somrawee@gmail.com	



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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:
Name and Location of Event: Globe International Virtual Science Symposium
Address: 59 m. 6 Mahidol Rd, Mueang Chiang Mai District, Chiang Mai 50000
Telephone: 0639704640
Email Address: panithan@varee.ac.th

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Date: 29/02/24	
Date.	_



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By signing below, I represent that I am of legal age, have full legal revoke or deny this agreement at any time.	capacity, and agree that I will not
I have read the foregoing and fully understand its contents.	
Accepted by:	
Signature: Furbal	Date: 29 March 2024
Name and Location of Event: Home	
Address: 166/16 Moo 2 Tonpao , Sankampang District ,	Chiangmai Province Thailand
Telephone: (+66) 0846114240	
Email Address: bannaruck@varee.ac.th	

MEDIA RELEASE

Please Provide a Brief Description of the Image(s): <u>Images and video presentation of research</u> team who study about growth rate and carbon storage of trees.

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Address:	166/16 Moo 2 Tonpao , Sankampang District , Chiangmai Province Thailand
Date:	29 March 2024