

I, Suzance Ettaker, am the parent/guardian/legal representative of
(Please print your name)
Yusmine Ahmad 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: Mother Date: 3-1-24
Signature of Minor: Masmil amus
Name and Location of Event: 6,1088 NSS
Address: 1387 N John Day Rd
Telephone: 313 - 415 - 2006
Email: Suce + taner (a) with all (1)

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Printed Name: Suzanne F	Haver			
Email Address: <u>JUCE++0MRX</u>	QUANO -	S)M	•	
Address: \\\\351 \N \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		Pd		
Date: <u>March</u> 5, 20	j			



(Please print your name)	, am the parent/guardian/legal representative of
Jenna Charda	and do hereby give permission
(Please print name of child)	
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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 I I consent to its execution by the Minor. I agree irm the this agreement at any time.
Signature of Parent/Guardian/Legal Representa	ative of Minor:
Relationship to Minor: Mother	Date: 3-4-2024
Signature of Minor: free free	
Name and Location of Event: Gestwoo	I High School Dearborn Hts. MI
Address: 2033 Whitefield S	
Telephone: (313) 414 - 7091	
Email: Mcharara 10 @ gmail.	Corn
J	

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Address: 2033 Whitefield 5t.	
Date: 3-4-24	

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I, Abolac El-Saghi, am the parent/guardian/legal representative of (Please print your name)
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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: Father Date: 3/4/24
Signature of Minor: Dicker & Loghin
Name and Location of Event: 61086 IVSS
Address: 520 Berwyn
Telephone: 313-492-9698
Email: aelsaghir 007@gmail.com

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Address: 520 BERLYN ST DEARBORN HEIGHTS, MI 4812
Date: 3/4/2024



i, Sadia Selman (Please print your name)	, am the parent/guardian/legal representative of
alaa Selman	and do hereby give permission
(Please print name of child)	
videotaped by NASA or its representatives and/or videotapes containing the words, in production of instructional and/or promoti (hereinafter the "Program") and that such and displayed publicly. I also understand videotapes is for an unlimited duration and	ter "Minor") to be interviewed, photographed and/or s. I understand and agree that the text, photographs, mage and/or voice of the Minor may be used in the onal materials produced by or on behalf of NASA materials may be distributed or broadcast to the public that my permission to use the text, photographs and distributed or broadcast to the public that neither I nor the Minor will receive any nor for the use, if any, by NASA of the Minor's words,
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representative of the above-named Minor.	east 18 years of age and am the parent/guardian/legal I have read the foregoing agreement and am familiar f and I consent to its execution by the Minor. I agree lisaffirm the this agreement at any time.
Signature of Parent/Guardian/Legal Repres	sentative of Minor: Sadiq Selman
Relationship to Minor: Father	
Signature of Minor: alaai Selmana	
Name and Location of Event: <u>Crestu</u>	vood High School Dearborn It-Ls. MI
Address: 26795 Kingsu	ead Dr.
Telephone: 313 - 358 - 499	
Email: <u>Sadiq</u> - <u>Jafar@g</u>	mark com

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Printed Name: Sadia Selman			,
Email Address: Sadig-Tafar@q	mali ic	om	
Address: 26.795 Kingswood	DC	,	-
Date: 03 - 05 - 2024	•		