

NASA Media Release for Parent and Minor

I, FAHAD SALIM MoHAMMED am the parent/guardian/legal representative of (Please print your name)
MOHAMMED FAHAD SALIM 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: FATHER Date: 5/3/2024
Signature of Minor:
Name and Location of Event: Sultanate of onen Al But simi
Address: Alkhadra area
Telephone: 0096896161020
Email: Ibrahimhabib8/@ gmail-com

MEDIA RELEASE

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Signature:

Printed Name: ZAHAD SALIM MOHAMMED

Email Address: I breshimhabib 81@ geniail-com

Address: Alkhadra - oman

Date: 5/3/2024



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Signature of Parent/Guardian/Legal Representative of Minor: HADER
Relationship to Minor: Father Date: 5/3/2024
Signature of Minor:
Name and Location of Event: Sultanute of Oman Al Burain
Address: Al Khadra
Telephone: 00968 92170077
mail: 710 million 18 William Mary 17

MEDIA RELEASE

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Printed Name: HAIDER ABOUL HADI

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