NASA Media Release for Parent and Minor

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

Hala Komiha
(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: __________________________

Date: __________________________

Signature of Minor: __________________________

Name and Location of Event: Globe IVSS

Address: __________________________

Telephone: __________________________

Email: __________________________
MEDIA RELEASE

Please Provide a Brief Description of the Image(s):

I hereby grant permission to the University Corporation for Atmospheric Research, a Colorado non-profit corporation ("UCAR"), to use, publish, make derivative works, and reproduce the Image(s) for any lawful purpose related to UCAR's research, academic and research mission, in perpetuity and in any and all mediums.

I warrant that I am the copyright holder of the Image(s) described above, or that I have permission from the copyright holder of the Image(s). I further warrant that I have authority to grant the permission requested in this Media Release. (If the individual submitting the Image(s) is a minor, this Media Release should be signed by a parent or legal guardian).

Signature: 

Printed Name: Abir Akil

Email Address: Aakil@csdm.k12.mi.us

Address: 27006 Boudelle Street

Date: 3/1/12
NASA Media Release for Parent and Minor

I, ____________________________, am the parent/guardian/legal representative of

______________________________
(Please print name of child)

and do hereby give permission

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Signature of Parent/Guardian/Legal Representative of Minor: ____________________________

Relationship to Minor: ____________________________ Date: ____________________________

Signature of Minor: ____________________________

Name and Location of Event: ____________________________

Address: ____________________________

Telephone: (513) 575-5511

Email: amhdds@hotmail.com
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Signature: [Signature]

Printed Name: Maher Harp

Email Address: mahrp6@gmail.com

Address: 1267 N. Evangeline St.

Date: 3/10/22