

Office of Communications and Media Relations

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Student Name: School: CONSENT TO ATTEND MOUSE EVENT, TRAINING, FIELDTRIP OR CONFERENCE My son/daughter has permission to attend the MOUSE Event on _____ (date/s). Signature of Parent/Guardian (if Student is under 18): ______ Date: _____ OR Signature of Student (if 18 or over): ____ Date: CONSENT TO PHOTOGRAPH, FILM, OR VIDEOTAPE A STUDENT FOR NON-PROFIT USE (e.g. educational, public service, or health awareness purposes) I hereby consent to the participation in interviews, the use of quotes, and the taking of photographs, movies or video tapes of the Student named above by MOUSE Inc. I also grant to MOUSE Inc. the right to edit, use, and reuse said products for non-profit purposes including use in print, on the internet, and all other forms of media. I also hereby release the New York City Department of Education and its agents and employees from all claims, demands, and liabilities whatsoever in connection with the above. Signature of Parent/Guardian (if Student is under 18): Date: Address of Parent/Guardian: \mathbf{OR} Signature of Student (if 18 or over): ______ Date: _____ Address of Student:

☐ Check here if you do not give consent to photograph, film or videotape for non-profit use.