



Division: \_\_\_\_\_

Category: \_\_\_\_\_

Title of Entry: \_\_\_\_\_

### Photo/Video/Recording Release Form

Information: Every student participating in the National History Day Philly contest must complete a Photo/Video/Recording Release. *Sponsoring teachers, other than parents, may not sign this form for participating students.* If you do not wish to have your picture used for media or advertising purposes sponsored by National History Day Philly, please indicate this on the form. One form may be used for a single entry. However, each student may submit a separate form. **Use one form, only if convenient. Bring this form with you to the competition. It will be collected at registration.**

Entrants, if you are **younger than 18 years of age**, please have a parent or legal guardian read and sign the following statement:

#### Authorization Statement

I, the parent or legal guardian of the student entrant listed below give permission to National History Day Philly, National History Day, and NHD in PA for publication of photos, video and recordings taken of him/her at the National History Day Philly contest on March 9-10, 2011. I also give permission to both to display and/or present his/her project to promote the National History Day program. I understand that neither he/she, nor I will be paid any royalty nor other compensation and relinquish any right I or my son or daughter may have to payment if a photo, video or recording of him/her is published.

Student Name: \_\_\_\_\_

Parent or Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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Entrants, if you are **18 years of age or older**, please read and sign the following statement:

#### Authorization Statement

I give permission to National History Day Philly, National History Day, and NHD in PA for publication of photos, video and recordings taken of me at the National History Day Philly contest on March 9-10, 2011. I also give permission to both to display and/or present my project to promote the National History Day program. I understand that I will not be paid any royalty or other compensation; and I relinquish any right I may have to payment if my photo, video or recording is published.

Student Name: \_\_\_\_\_

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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