

# NEIRSEF STUDENT INFORMATION FORM AND MEDIA CONSENT

To be filled out and signed by parent/guardian and given to Display Inspector

**Parent and Student:** The following information is needed to:

- 1) Provide contact information of award winners to the sponsoring organization as some awards are mailed to the student
- 2) Indicate your preference regarding future mailings and data collection
- 3) Complete the media release to allow use of student pictures for purposes listed below

**Please return completed form along with your inspection card.** Thank you!

## **Part 1:**

Student's Full Name (Printed) \_\_\_\_\_

Student School: \_\_\_\_\_ Birth Year: \_\_\_\_\_ Grade: \_\_\_\_\_

Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email: \_\_\_\_\_

## **Part 2: Media Waiver, Consent, and Release for Northeast Indiana Regional Science & Engineering Fair (NEIRSEF)**

I understand that by participating in the NEIRSEF my child may appear in photographs taken by an official photographer throughout the day and at the awards ceremony. These photographs are used for educational outreach displays and brochures, as well as being posted on the Fair website. **No names will be associated with these photos by Purdue FW without first contacting the parent/guardian.**

In addition to photos, I understand that students may be interviewed and/or video recorded by the official Fair videographer during the awards ceremony. **I understand that if I do not want my child to appear in award photos or on the awards video I must indicate that below.**

I understand that if I do not want my student to be interviewed or photographed by external news media invited to cover the NEIRSEF I must instruct my student to inform the photographer and to refrain from answering interview questions by the news media or providing their name.

I have read the above, understand, and grant permission for the picture(s) and videotape to be used as indicated above.

For those persons under the age of eighteen (18) years listed above:

Parent/Legal Guardian of (minor's name) \_\_\_\_\_

\_\_\_\_\_  
Parent or Legal Guardian Signature  
**OR** Student signature if over 18 years old

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Parent or Guardian Name  
**OR** Print Student Name if over 18 years old

☐ **NO**, I do not want my child photographed or videotaped at the awards ceremony. By checking this I acknowledge if my child wins an award he/she will pick up the award after the ceremony and not appear on the stage.