



MEDIA RELEASE – MINOR

I, Parent/Legal Guardian of (child’s name) _____ hereby consent and authorize an employee or agent of Treaty Education Alliance (TEA) to take photographs or motion pictures of the above named child; or to produce videotapes, audiotapes, closed circuit television programs, web casts, or other types of media productions that capture his/her name, voice, and/or image (any of the foregoing types of media are called the “Materials” in this Consent and Release form).

**If you wish to be notified before “Materials” are posted to a public forum, initial here, _____*

I authorize TEA to copyright the Materials, and I authorize TEA to use, reuse, copy, publish, display, exhibit, reproduce, license to a third party, and distribute the Materials in any educational or promotional materials or other forms of media, which may include, but are not limited to program publications, catalogs, articles, magazines, recruiting brochures, websites or other electronic forms of media, and to offer the Materials for use or distribution in other publications, electronic or otherwise, without notifying me.

I also agree that TEA may identify him/her by name. *(If the person does not wish to be identified by name, etc., please have them cross through this sentence, and initial here.) _____*

I agree that I am participating on a voluntary basis, and I will not receive any payment from TEA for signing this release or as a result of any publication of the Materials.

I understand the terms and provisions as contained in this Agreement and agree to be bound by the terms and provisions as contained herein.

Printed Name of Parent/Legal Guardian

School / First Nation

Signature of Parent/Legal Guardian

Witness

Date _____