

Issue Date: February 29, 2024

2024 Developmental Disabilities Awareness Art Contest Release Form

Student's first and last name:

Student's date of birth:

Name of LEA (school district) where the student attends school:

Name of the school the student attends:

Guardian's first and last name:

I hereby consent and agree that the Vermont Agency of Education has the right to utilize photographs of my child and any content submitted as part of the 2024 Developmental Disabilities Awareness Art Contest, and to use these for educational or promotional materials, including video, print, internet or web-based publications and social networking pages.

I further consent that the child's name and identity may be revealed therein or by descriptive text of commentary. I do hereby release to the Vermont Agency of Education all rights to exhibit this work publicly or privately, including posting it on the Vermont Agency of Education website. I waive any rights, claims or interests I may have to control the use of the child's identity or likeness in the photographs, video or audio, in perpetuity, and agree that any uses described herein may be made without compensation or additional consideration.

I do hereby declare and represent that in making, executing and tendering this voluntary contest, I understand and acknowledge the circumstances involved in my child's participation in the 2024 Developmental Disabilities Awareness Art Contest and that I have read this statement, understood its contents, and executed it on my own free will and choice.

I represent that I have read and understand the forgoing statement and am competent to execute this agreement. (Youth under 18 must have a guardian signature.)



I have executed this _____ day of _____, 20____,

(Signature of Parent or Guardian)

Contest photo and the signed release form must be submitted by the LEA as part of the official registration packet to the <u>2024 Developmental Disabilities Awareness Art</u> <u>Contest survey</u>.

