



STEM-SCAPE 2017 Event Consent and Release Form

**This form must be legibly completed for each student and teacher or chaperone participant.
If the student is under the age of 18, this form must be signed by a parent or guardian.**

I hereby release the American Astronautical Society (AAS), the Beaver Run Conference Center, Arrow Stage Lines and all participating companies and organizations and/or their respective member companies, affiliates, Board of Governors/Trustees, licensees and assigns from all claims, demands, liabilities, damages, costs and expenses that I may now or hereafter have against AAS and all participating parties arising in connection with students' participation in the STEM-SCAPE 2017 event. I hereby grant to any or all of the participating organizations of the STEM-SCAPE event the right to photograph and/or videotape and use the video tape and/or photograph of the below named student during participation in any events related to the STEM-SCAPE event and the right to use this media without further compensation to me or the below-named student and without any limitation whatsoever.

Student Name: _____

School Name: _____

Parent/Guardian Name: _____
(only if student is under 18)

Signature: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____

Country: _____