



**inspiHER Girls Leadership Foundation
MEDIA RELEASE CONSENT FORM**

Participants of the *inspiHER Girls Self-Defense & Cyber Safety Clinic* may be photographed and videotaped for use in inspiHER promotional and educational materials. I authorize *inspiHER* to record the image and voice of the participant named below and I give *inspiHER*, and all those acting with *inspiHER's* approval, all rights to use these images and voice recordings. I understand that such images and/or recordings may be used for educational and promotional purposes. This authority extends to all conventional and electronic media, including the internet and future media, and to printed material. I understand and agree that these images and recordings may be duplicated and distributed without compensation.

Print participant's name: _____

Signature of Parent/Guardian of minor participant or of participant aged 18 and up:

Date _____

**inspiHER Girls Self-Defense & Cyber Safety Clinic
PARENT/GUARDIAN CONSENT FORM**

I grant permission for (print participant's name) _____ to participate in the *inspiHER Girls Leadership* programming.

I have read the session descriptions and approve of my child attending the *inspiHER* clinic sessions. I accept any risks associated with the assigned sessions and activities. I understand that my child has a role to play as regards to her safety and security. I will speak with my child about the need to honor safety rules and to behave responsibly.

Parent or legal guardian:

Print: _____

Parent or legal guardian:

Signature: _____ **Date:** _____