**NJ EFNEP Program**

**Media Release Form for Children**

I am the parent or legal guardian of (please print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. I understand my child is taking part in nutrition activities hosted by NJ EFNEP (Expanded Food and Nutrition Education Program) wich is associated with Rutgers Cooperative Extension.

I know that NJ EFNEP/Rutgers Cooperative Extension likes to show what children do while in the program. So, I will allow NJ EFNEP/Rutgers Cooperative Extension to use my child’s:

 (Check all that apply)

 \_\_\_\_ Spoken or written comments

 \_\_\_\_ Photographs while playing a part in the program

 \_\_\_\_ Videotape while playing a part in the program

 \_\_\_\_ Voice on audio tape during our program.

 NJ EFNEP/Rutgers Cooperative Extension may use the above for:

(Check all that apply)

\_\_\_\_ Displays about the progam

\_\_\_\_ Newspaper stories

\_\_\_\_ Radio features

\_\_\_\_ Television features

\_\_\_\_ Websites on the Internet about our program and its successes

I also know that if I do not want my child’s pictures or comments used, I do not have to sign this form, and she/he will still be able to take part in the program.

I know that if my child’s written words, photos, video clips, or audio clips are used, neither my child, nor I will receive payment of any kind.

Signature of Parent or Guardian:

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name of Parent or Guardian:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_



Revised 11/6/19