

Visit Information

Parent/Guardian Consent Form

Dear Parents and Guardians:

As you know, our class is participating in an exciting economic education program called *JA BizTown*. We will soon be visiting the *JA BizTown* facility to participate in the experiential simulation.

Students are video recorded & photographed daily by student workers at *JA BizTown*. The videos and photographs are given to the school for later viewing and use in our classroom. On occasion, the *JA BizTown* experience may be photographed or video recorded by external media for use in communications and marketing materials. If JA of Northern Indiana is aware of this filming, it will notify the school in advance. There are occasions, however, when schools are not notified in advance of media coverage.

Please complete the form below to inform us of your preferences for being included or omitted from video recording or photography. Students that do not have permission for video/photos will wear a visual indicator so camera operators, photographers and other media do not take their photo or video.

This form must be signed and returned to us by _____ (Date).

Sincerely,

(Teacher Signature)

(Select One Option and Return)

My child has my permission to be video recorded or photographed as part of the *JA BizTown* experience.

JA may use Student's name, voice, image, picture, silhouette, and other aspects of Student's likeness ("Likeness") in any recording, video, still-image, photograph, webinar, online event or other form of media (collectively, "Media"), in connection with JA Programs and/or the Student Work Product, or for any purpose related to JA or their funding partners, including with promotional materials, advertising, and publicity.

JA **will not** permit use of Student's Likeness by unaffiliated third parties, or for any third-party commercial use or use contrary to JA's educational mission of empowering young people.

My child does not have my permission to be video recorded or photographed as part of the *JA BizTown* experience.

Student Name: _____

Parent Signature: _____ Date: _____

School Name: _____