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Media Consent Form

I, the undersigned, do hereby consent and agree that the Department of Youth Affairs, its employees, or agents have the right to take photographs, videotape, or digital recordings of me and to use these in any and all media, now hereafter known. I further consent that my name and identity may be revealed therein or by descriptive text or commentary.

I do hereby release to the Department of Youth Affairs, its agents, and employees all rights to exhibit this work in print and electronic form publicly or privately and to market and sell copies. I waive any rights, claims, or interest I may have to control the use of my identity or likeness in whatever media used.

I understand that there will be no financial or other remuneration for recording me, either for initial or subsequent transmission or playback.

I also understand that the Department of Youth Affairs is not responsible for any expense or liability incurred as a result of my participation in this recording, including medical expenses due to any sickness or injury incurred as a result.

Participant's Name: _____

Address: _____

Contact Number: _____

Participant's Signature

Date

If participant is under 18 years old, parent/guardian must print and sign below.

Parent/Guadian Name (Print)

Parent/Guardian Signature

Date

DIPÅTTAMENTON ASUNTON MANHOBEN

"For a better tomorrow."

