

Parental Approval for Media Coverage/Participation
Texas Tech University

Visitor's Name _____

Parent's Name(s) _____

I hereby give permission for the name of the minor listed above photographs to be used on the Texas Tech website and him/her/they to participate in any video that may be released on the news which might transpire during the course of the program. I represent that I am a parent (guardian) of the minor whose name is listed above and I hereby agree to have my child participate in media coverage.

Signature of Parent or Guardian

_____ Date _____

My child may not participate in media coverage.

Signature of Parent or Guardian

_____ Date _____