

**2019 PARTICIPATION IN DESTINATION RESEARCH (SCIENCE DAY)
PARENTAL CONSENT FOR MINOR**

Voluntary Participation: I hereby agree that my child, _____, may participate in the Destination Research educational activities as part of Houston Methodist Research Institute’s (Methodist) Science Day 2019 program on June 24, 2019 (“Program”). Participation in the Program means that my child will be at Methodist participating in group activities without my attendance. Such activities will include, but may not be limited to, the following: Surgical simulation, i.e. suturing and watching demonstration of ultrasound imaging; resolving a problem-based learning challenge via live-streaming, remotely, with Weill Cornell medical students, supervised by Houston Methodist staff; and attending a panel discussion about careers in science.

Voluntary Participation: My child’s participation in the Program is voluntary. In exchange for the opportunity to allow my child to participate I agree to the terms of this document.

Public Disclosure and Recording: I understand that the Program may be open to the general public, and that any information that my child provides verbally, visually or by other means during or in connection with the Program may be recorded by audio, visual, electronic or other means.

Grant of Rights: I hereby grant to Methodist, and its parent, affiliates, authorized agents, vendors, successors and assigns (collectively, “Methodist Grantees”), a perpetual, irrevocable, non-exclusive, paid-up and royalty-free right and license (that is, free of charge, permission, which I may not withdraw at any time) (A) to record my child’s image, likeness and voice recorded during my child’s participation in the activity listed above, and to copy, edit, display, publish, create derivative works from, distribute and otherwise use those recordings or others provided by my child in connection with the Program, and (B) to reproduce, to use, to create derivative works from, and to distribute the works of authorship (such as posters, handouts, videos, sound recordings and presentations) and materials provided by my child in connection with the Program, in each case (A and B) in whole or in part, separately or as part of a collection of works, and in any format or medium (such audio, video, Internet, electronic, printed and media not yet conceived), without my review or approval, and without geographical limits, in any manner that is not intentionally misleading or defamatory and for any purpose that is not illegal.

Waiver of Compensation: I waive any rights, whether express or implied in law or contract, on behalf of myself and my child to any compensation, arising in past, present or future, related to the rights granted above. For purposes of clarity, if any Methodist Grantee receives revenue from providing access to all or any portion of the Program, or the materials provided by my child contemporaneously or thereafter, neither I nor my child will be entitled to any compensation or any portion of the revenue received.

Release: I hereby release the Methodist Grantees from any and all claims and demands arising out of or in connection with the use of the recordings, works and materials of my child made in accordance with this document and the Program, including but not limited to any claims for copyright infringement, defamation, invasion of privacy, or right of publicity.

Name (legibly printed): _____

Signature: _____

Date: _____

Address: _____

Mobil number/emergency contact number: _____

Age of my child: _____

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