



Angelo Del Toro

PUERTO RICAN | HISPANIC YOUTH LEADERSHIP INSTITUTE

Authorization to Photograph, Audio Tape, and/or Video Tape Student 2019

Student's Name: _____

Delegation: _____

Parent/Legal Guardian's Name (print): _____

As a parent or legal guardian of the above referenced student, I hereby authorize The Angelo Del Toro PRHYLI or any organization involved with the program to share student information, interview, photograph, audio tape and/or video, tape the student while he/she is participating in the 2019 Angelo Del Toro Puerto Rican/Hispanic Youth Leadership Institute (PRHYLI) and local delegation trainings. I understand that these will be used for educational programs, educational conferences or workshops, or other purposes authorized by Questar III including but not limited to use on the Questar III PRHYLI website and I consent to such use. Scholarship winners' photos, names and high schools may also be disclosed.

Parent/Legal Guardian Signature

Date

Please submit this document by February 8, 2019

This contract is funded through the New York State Education Department.

