

Media Waiver Form

FUTURE CITY TEAM NAME:

ORGANIZATION:		
EDUCATOR:		
Please make a copy of this form for all members of the tear Regional or National Finals. (This includes the educator and copy of the Media Waiver Form to their Regional Coordinat	d mentor as well). All team	· -
Student Media Waiver		
By signing below, we give our consent to DiscoverE and Futouse the student's name, photograph, likeness, and all wo and City Presentation in order to promote the Future City® Called upon by journalists to answer questions about his/howe will also allow the student to speak to any media via ph	ork products including City Competition. We understar er involvement in the Futur	Description, City Model and that the student may be
Date: FC Region:		
Student Name (Please Print):		
Guardian Name (One Only):		
Guardian Signature:		
Guardian's Email*:		
City:	State:	Zip:
*Your email will be added to our database for future evaluation studies. If you'd like to opt out, please send us an email at info@futurecity.org.		
Educator/Mentor Media Waiver		
By signing below, I give my consent to DiscoverE and Futur to use my name, photograph, and likeness in order to prom I may be called upon by journalists to answer questions ab and I will also speak to any media via phone or television.	ote the Future City® Comp	etition. I understand that
Date: FC Region:		
Name (Please Print):		
City:	State:	Zip:
Signature:		

All Future City Competition forms are available as writeable PDFs. **Note**: You need Adobe Reader installed on your computer and acting as your default PDF reader. Download the forms and a free version of Adobe Reader at **futurecity.org/resources** (filter for Competition Forms & Project Plan).

Competition Forms