



*“Making Democracy Work In My Community”  
Student Video Contest  
PARENT/GUARDIAN PERMISSION FORM*

*One completed and signed copy of this document must be submitted for your entry to be considered complete and eligible for a prize.*

\_\_\_\_\_  
Title of Video Entry

\_\_\_\_\_  
Student’s Name

\_\_\_\_\_  
Student’s Email

\_\_\_\_\_  
Student’s Date of Birth

\_\_\_\_\_  
High School Name

\_\_\_\_\_  
Student’s Grade

\_\_\_\_\_  
High School Address

\_\_\_\_\_  
Parent/Guardian Name

\_\_\_\_\_  
Parent/Guardian Email

\_\_\_\_\_  
Parent/Guardian Address

\_\_\_\_\_  
Parent/Guardian Telephone

**Parent/Guardian: By signing this document you affirm the following:**

I am the parent/legal guardian of the student named above, and I grant permission for him/her to enter the “Making Democracy Work In My Community” Student Video Contest sponsored by the League of Women Voters of Massachusetts Citizen Education Fund. I have read and agree, on my behalf and on behalf of my student, to abide by and consent to the Contest’s Official Rules. I grant full permission and authority to the League of Women Voters of Massachusetts and the League of Women Voters of Massachusetts Citizen Education Fund to use, publish, display, reproduce, or replicate the video submission and the likeness, persona and/or voice of the minor for whom I am the parent and legal guardian.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

Your completed and signed form can be scanned/emailed to the [lwvma@lwvma.org](mailto:lwvma@lwvma.org); faxed to (617) 248-0881; or mailed to League of Women Voters of Massachusetts, 133 Portland Street, Boston, MA 02114.