2010 NEVADA REGIONAL SCIENCE BOWL

HOSTED BY THE NATIONAL NUCLEAR SECURITY ADMINISTRATION, NEVADA SITE OFFICE

MEDIA RELEASE FOR ADULT PARTICIPATION

January 29 – 30, 2010

The **National Nuclear Security Administration Nevada Site Office** is the host of the 2010 Nevada Regional Science Bowl. In carrying out this event, participants are often photographed, filmed, videotaped, or otherwise recorded to illustrate the kind of activities happening at the academic event. You, _____, may be photographed, filmed, videotaped, or otherwise recorded during participation at the Nevada Regional Science Bowl and we desire your permission to use any images or recording taken at this time to promote our training and educational programs and other activities. Any such image or recording may be included in such promotional materials as brochures, booklets, videotapes, reports, press releases, Web site, and exhibits. If you agree to the use of any such images or recording, please execute the RELEASE FORM below and return by **November 12, 2009** to:

Nevada Regional Science Bowl Coordinator, Vicky Walter
National Security Technologies, LLC
P.O. Box 98521
Mail Stop NSF 119
Las Vegas, NV 89193-8521

RELEASE FORM - ADULT

To promote, evaluate, or otherwise describe Nevada Regional Science Bowl training and educational programs and activities, I give permission to National Nuclear Security Administration Nevada Site Office, and its agents, to use in connection with any publications (including but not limited to brochures, booklets, videotapes, reports, press releases, Web site, and exhibits) any image or recording in which I, _____, an adult, appears, to use and cite any comment(s) verbal or written, made by said adult about any Nevada Regional Science Bowl program, and to use said adult's name in connection with any publication and in such manner as determined by the National Nuclear Security Administration Nevada Site Office.

_____ Signed: _____
(Print name)

Date: _____ School Name: _____

THIS FORM MUST BE WITNESSED. Witness: _____
(Print name of witness)

Witness Signature: _____ Date: _____
(Signature of witness)

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