



ACT-SO IMAGE CONSENT RELEASE FORM:

The ACT-SO image consent release is a required document for the ACT-SO program.

I _____ understand that by participating in the NAACP ACT-SO Program that my image may be used in promotional material for current and future events and by the NAACP, Montgomery County Public School, Montgomery College and the Universities at Shady Grove. This includes social media (Facebook, Twitter, Instagram, etc) Youtube as well as traditional media (newspaper, magazine, television, etc.) I understand that my permission to use my image will not result in any compensation during any ACT-SO programs or promotions.

Parent or Guardian _____ Date _____

Signature _____ Date _____

Student _____ Date _____

Signature _____ Date _____

***SECTION TO BE COMPLETED BY ACT-SO CHAIRPERSON OR DESIGNEE

ACT-SO CHAIRPERSON _____

ADDRESS: P.O. BOX 2165
ROCKVILLE, MD
20847-2165

- This student is a local gold medal winner and will advance to the National Competition
- I certify that all the information given above is correct. I also certify that I have read and fully understand all eligibility requirements and that I satisfy all of them.

Signature _____ Date _____