



Parent/Guardian Information and Consent Overview

Dear Parents/Guardians,

We are excited to share with you that your child has been selected to be a member of the IntegrateNYC program and city-wide Youth Council on school integration. They have been nominated for this exciting opportunity because they have demonstrated the following characteristics which are essential for a young activist with the potential to stand for integrated equitable schools:

- Vision for the Future** of a transformed school system.
- Integrity** in their word and their work.
- Justice** in their ethics and relationships.
- Compassion** in their treatment and understanding of others.
- Leadership** in and out of the classroom.

As a member of the IntegrateNYC Youth Council, your child will be working on conducting **research, advocacy, and action** with a group of powerful young people from around NYC to transform New York City schools into more equal, fair, and integrated schools where young people are seen as leaders and collaborators with politicians, the Department of Education, teachers, and advocates. They will:

- Build relationships** with young leaders from around NYC.
- Discuss and explore** the unequal and segregated state of our schools and how we can transform our schools to powerfully serve every student in integrated, equitable schools in NYC.
- Meet with politicians, advocates, and activists** to share their ideas on how to improve schools.
- Interview with media** and researchers to share their message with the world.
- Co-create art and advocacy** projects with young people & educators across the city.
- Generate policy recommendations** that will be shared with politicians and policy makers in the department of education.

In the past, students who have worked on such projects have been awarded opportunities such as:

- Being invited to **present** to the **United Nations** about their youth leadership.
- Giving a **speech** to the **US Department of Education** on school integration.
- Receiving **job offers and internships** to start their careers in teaching and education.
- Being featured in a **national documentary** and multiple **news sources**.
- Being accepted into **ivy league summer leadership and development programs**.

The work of the IntegrateNYC Youth Council will include your child participating in our regularly scheduled meetings, workshops or other outreach to family, friends, and community members via video conference or webinar in light of current circumstances. Participation in IntegrateNYC is entirely voluntary and below is the program consent information that we ask for you to review and sign in order for your child to participate. Of course, if you have any questions about your child's participation with IntegrateNYC, please feel free to reach out and contact us.

Sincerely,
The IntegrateNYC Team



Digital Access Consent Form

I _____ (Parent/Guardian Name) give my child, _____ (Student Name), permission to take part in the activities of **IntegrateNYC, Inc.** (“IntegrateNYC” or the “Organization”). I also understand that my child may digitally or electronically participate in events or presentations, whether accompanied or unaccompanied, and that IntegrateNYC is not responsible for any students attending such events.

CONSENT FOR PROGRAM PARTICIPATION

By signing below, I agree to the following:

- I allow my child to take part in the activities associated with IntegrateNYC including communicating with IntegrateNYC staff or other related third-parties (i.e., program moderators or otherwise) via phone, email, videoconference, webinar or other forms of electronic communication.
- I understand and agree that IntegrateNYC may share my student’s contact information with other participants, members, officers, or employees of the organization in order to support communication. My student's contact information will not be shared with a third party or sold by IntegrateNYC.
- I agree to hold IntegrateNYC, its officers, employees, directors, agents, managers, representatives or affiliates harmless from any and all losses, damages, claims, expenses, and liabilities incurred by my child during his or her participation in any program or activity described above. I further understand that my child, during his or her digital or electronic participation in any event described herein, is not under the supervision of the Organization or its staff.

Participant Signature

X _____ Date _____

Parent/Guardian’s Signature (if student is under 18)

X _____ Date _____

Phone Number _____

Email _____

EMERGENCY CONTACT

Name (print) _____

Phone Number _____

Relationship to Student _____



Media Consent and Release

I hereby grant consent to IntegrateNYC and its officers, employees, agents, representatives, successors, sponsors, and licensees to use my image and likeness, as well as quotes and interview statements, in its publications, advertising or other digital and print media productions.

This consent includes, but is not limited to:

- a) Permission to take photographs or motion pictures of me and my contributions to all activities conducted by IntegrateNYC, including but not limited to Youth Council/ Leadership Council meetings, demonstrations, rallies, and relevant public forums; or to produce videotapes, audiotapes, quotes, or other types of media productions, electronic or otherwise, that capture my name, voice, and/or image; and
- b) Permission to use quotes from the interview(s) (or excerpts of such quotes), photograph(s), videotape(s), audiotape(s) or reproduction(s) of me and my Integrate NYC work products, and/or recording of my voice, in part or in whole, in its publications, in newspapers, magazines and other print media, on television, radio and electronic media (including the Internet), in theatrical media and/or in mailings.

I understand that IntegrateNYC may use such photographs, audio and video with or without associating names thereto. I further waive any claim for compensation of any kind for IntegrateNYC's use or publication of photographs, audio and video of me and/or my IntegrateNYC work products, including during any program with exclusively digital access.

I HAVE READ THIS WAIVER AND RELEASE AND FULLY UNDERSTAND ITS TERMS. I HAVE SIGNED THIS AGREEMENT VOLUNTARILY AND UNDER MY OWN FREE WILL.

Participant's full legal name (please print clearly):

Signature of participant:

Date:

IF UNDER 18:

I also hereby release my local Department of Education and its agents and employees from all claims, demands, and liabilities in connection with any of the foregoing provisions.

Guardian's full legal name (please print clearly):

Signature of legal guardian:

Date: