

#### TEENHACKS LI HACKATHON AT NYIT-LONG ISLAND, NOVEMBER 9-10, 2019 BEHAVIORAL CONDUCT CONSENT FORM

New York Institute of Technology (NYIT) expects that participants will act in a sensitive and considerate manner at all times and respect the rights of others. While every subtlety of proper behavior cannot be detailed, the following rules are to be adhered to strictly. Failure to abide by them is dealt with immediately and leads to expulsion from the **Teen Hacks LI Hackathon at NYIT-Long Island on November 9-10, 2019.** No portion of fees will be refunded in connection with an expulsion. Participants expelled from the event will be expected to make arrangements for an immediate departure at their own cost. These rules apply to all participants in the **Teen Hacks LI Hackathon at NYIT-Long Island on November 9-10, 2019**.

#### Behavioral Standards

1.	The possession and/or use of drugs and/or alcohol, on campus or off, is forbidden.
	Possession of weapons or incendiary devices of any kind is prohibited. Contraband is
	confiscated upon discovery; expulsion follows immediately.

- 2 Smoking is prohibited on the campuses of NYIT.
- 3 NYIT deems unacceptable any verbal or physical conduct that demeans others because of their race, gender, ethnic background, religion, or sexual orientation.
- 4 Any behavior that is deemed to be unacceptable is in the sole discretion of NYIT.

#### Please sign below and return this form with your admission materials:

Consent: I, the undersigned, understand and agree	to abide by the above stated regulations.
Participant Signature	Date
<b>Consent:</b> I, the undersigned, acknowledge that I have with the applicant and agree that the applicant show standards.	_
Parent/Guardian Signature	Date



#### TEENHACKS LI HACKATHON AT NYIT-LONG ISLAND, NOVEMBER 9-10, 2019 MEDIA CONSENT FORM

New York Institute of Technology (NYIT) often uses student photographs, video footage, and quotations from students to promote its programs. News media may also be interested in featuring some students who are attending the program. For both of these purposes we would like to secure your permission in advance. If you agree, please read and sign the following release authorizing both the use of photographs and quotations in all media and providing access to the program to the press. Please return this form with the other registration materials.

I hereby consent to and authorize the use of any and all photographs taken of the participant named below, for any purpose whatsoever, without further compensation. Such reproduction rights are for any and all purposes, including, without limitation, trade, commercial and editorial usage in any medium known or hereinafter developed anywhere in the world. Also, I hereby waive any right that I may have to inspect or approve the finished product(s) that may be used in connection with the photographs, or the use to which they may be applied. If I should receive any print, negative or other copy of the photography, I shall not authorize its use by anyone else. All negatives and positives together with the prints shall constitute New York Institute of Technology property solely and completely. The undersigned hereby grants permission to the Trustees of New York Institute of Technology and to NYIT's affiliates or others acting with authority from NYIT, with respect to:

- 1. Disclosing to news organizations the name, grade, high school, hometown and state, and name of course(s) for which undersigned is enrolled for the **TeenHacks LI Hackathon at NYIT-Long Island on November 9-10, 2019.**
- 2. Photographs or video footage taken of the undersigned by or on behalf of NYIT to use, edit, publish and reuse and republish the photograph(s) or video footage, in whole or part, individually or in conjunction with other photographs or video, limited to the intended use described in 1 above.

**(Applicable if participant is under 18):** I warrant that I am the parent/guardian of the subject named below, a minor, and have full authority to authorize this Release. I hereby release and agree to indemnify the licensed parties and their respective successors and assignees, from and against any and all liability arising out of the exercise of the rights granted by the Release.

I have read the foregoing release authorization and agreement before signing below and fully understand the contents of it.

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Participant Signature	Date		
Parent/Guardian Signature	Date_		



# Release

Date
I hereby grant to The Guardian Life Insurance Company of America, its subsidiary and affiliated companies, its or their agents and assigns (collectively "Guardian"), the right to photograph or otherwise record me (including in audio and vide recordings), and the irrevocable and perpetual right to use my likeness, voice and/or statements (collectively "Content") and to edit, modify, or create other works using the Content, for any business purpose (including without limitation broker and agent training, policyholder communications, and consumer advertising and promotion) in any and all media now known or hereafter developed (including without limitation print publications and reports, analog and digital radio and television broadcasts, and internet websites), and to secure copyright registrations in its own name or otherwise for materials containing the Content in whole or in part.
I consent to Guardian's use, in connection with the Content, of my name and/or personal biographical information that Guardian may collect (collectively "Information"). I understand that Guardian has no obligation to use any of the Content and/or Information, and I waive any right of attribution, right of publicity or privacy in connection with any such use made by Guardian. I also waive any right to royalties or other compensation in connection with Guardian's use of the Content and Information.
This Release is intended to be binding on me and my heirs, legal representatives and assigns and inures to the benefit of the successors, legal representatives, licensees and assigns of Guardian. This Release is governed by the laws of the State of New York and is the complete agreement with Guardian concerning the Content and Information.
I am at least eighteen (18) years old and have the right to contract in my own name. I enter into this Release of my own accord and not because I have been required to by Guardian or any other party.
I have read all of the above and fully understand the contents, meaning and impact of this Release.
Signed
Name
Address
Witness Name
AAPAn and Andreas



## **RELEASE**

### **MINORS UNDER 18 YEARS OF AGE**

Date	
hereby grant to The Guardian Life Insurance Company of America, its subagents and assigns (collectively "Guardian"), the right to photograph or of ecordings), and the irrevocable and perpetual right to use my likeness, votand to edit, modify, or create other works using the Content, for any busing and agent training, policyholder communications, and consumer advertision or hereafter developed (including without limitation print publication elevision broadcasts, and internet websites), and to secure copyright regnaterials containing the Content in whole or in part.	therwise record me (including in audio and video bice and/or statements (collectively "Content") ness purpose (including without limitation brokering and promotion) in any and all media now ons and reports, analog and digital radio and
consent to Guardian's use, in connection with the Content, of my name a Guardian may collect (collectively "Information"). I understand that Guard and/or Information, and I waive any right of attribution, right of publicity only Guardian. I also waive any right to royalties or other compensation in conformation.	dian has no obligation to use any of the Content r privacy in connection with any such use made
This Release is intended to be binding on me and my heirs, legal represent the successors, legal representatives, licensees and assigns of Guardian. of New York and is the complete agreement with Guardian concerning the	This Release is governed by the laws of the State
am under eighteen (18) years of age and I enter into this Release with my have been required to by Guardian or any other party. My parent or legal Release.	
have read all of the above and fully understand the contents, meaning an	d impact of this Release.
Signed	_
Name	
Signed	_ [IF SIGNEE IS A MINOR]
Parent/Guardian Name	
Address	