



Massachusetts Department of Elementary and Secondary Education

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Consent Form for Student Government Day Activities

I, _____, hereby consent:

- to allow the Massachusetts Department of Elementary and Secondary Education to release my name and home address to the Massachusetts Senate Legislative Education Office and the Massachusetts Supreme Judicial Court. I also consent to allow the Senate Legislative Education Office to release my name and home address to the state senator and representative who represent the district where I live. I understand that my state senator and representative may use this information to contact me before or on Student Government Day (**April 1, 2016**) for the purpose of talking with me or meeting with me to share information about their work in state government.
- to allow the Massachusetts Department of Elementary and Secondary Education, the Massachusetts State House, state legislators, the news media, and their employees or agents to photograph and/or videotape me at the State House on **April 1, 2016** for the purpose of documenting the activities of Student Government Day. I understand that the parties named above may use the photographs and/or videos to inform the public about Student Government Day. I give my consent to allow photographs and/or video of me, along with my full name, grade, school, and town, to be published by state government entities and the news media, including television, newspapers, other print media, and websites. I understand that any photographs and/or videos will be used only for non-commercial purposes.

Signature of Student

Date

Name of School

Grade

Age