

USA Regional Round
10th Annual International Mathematical Modeling Challenge
(IM²C)

2024

2023 HiMCM Team/Control Number:

US- _____

Parental/Guardian Authorization Form

I _____ (Parent/Guardian Name*)

give permission for my son/daughter/ward

_____ (Student Name)

to participate in the 10th Annual International Mathematical Modeling Challenge (IM²C). In the event that my son's/daughter's/ward's team is designated as an Outstanding winner, I give permission to disclose his/her name in the June 2024 IM²C press release, and to publish their resulting solution paper or solution abstract. I also give permission to release

_____ (Student Name)

to local newspapers, radio or television outlets in recognition of his/her outstanding achievement.

Signature: _____ (Parent/Guardian Name*)

Date: _____

*School administrators may sign in the case of residential schools.