

Oklahoma Department of Securities
Invest Ed® STARS Program Student Waiver

I, _____, am over the age of 18, and agree to participate as a student in the Invest Ed® Students Tracking and Researching the Stock Market (STARS) program offered by the Oklahoma Department of Securities (Department). This program focuses on investor education and fraud awareness. I recognize that to fully participate in the STARS program, I will be required to provide information through an online portal located at www.investedok.org. The information to be entered or submitted, and maintained by the Department, includes: my name, email address, school, grade level, teacher, risk tolerance assessment, pre and post assessments, message board communications, research data, stock selection data, and student report.

I understand that information maintained by the Department as part of the STARS program is governed by the [Oklahoma Open Records Act, Okla. Stat. tit. 51, §§24A.1-24A.31](#), and Section 1-607 of the [Oklahoma Uniform Securities Act of 2004, Okla. Stat. tit. 71, §§ 1-101 – 1-701](#). Further the information collected through the STARS program will be a matter of public record subject to inspection and copying by members of the public if not otherwise protected by federal or state law. Student reports submitted as part of a STARS awards contest may also be submitted to third parties for evaluation.

I further give the Department the unqualified rights and permission to publish photographs or other images, still or video, comments, and/or written reports (collectively, “Images”) relating to my participation in the STARS program. The Images may be published on the investedok.org website. I grant permission to the Department to reproduce, copyright, publish, circulate and otherwise use the Images.

I confirm that I have voluntarily executed this Waiver and that the rights granted herein to the Department will not conflict with or violate any commitment or agreement I have with any other individual or entity.

I have read this Waiver prior to signing it and I understand and agree to its contents.

Date: _____ Signature: _____

Printed Name: _____

Street Address: _____

City/ State/Zip: _____