

Student Recording Authorization

President and Fellows of Harvard College, acting through the Center of Mathematical Sciences and Applications (“Harvard”) plan to make video and audio recordings of the YHSA Oral Exam Student Presentation (the “Event”) on October 17, 2019. The recordings, or edited versions of them, may be made available to the Harvard community, to teachers and students at other educational institutions, and to the broader public, via the internet, television, DVD, or other means. It is also possible that the recordings may be used to make other derivative works in the future. Students who elect not to take part in this recording project may not participate in the Event. If you have any questions about this Authorization, or would like to discuss it before signing, please contact Mr. Lixin Qin at yauhsa2019@gmail.com

Student Name: _____

I hereby authorize Harvard or its designees to make audio and video recordings of Student’s presence and participation in the Event (collectively, the “Recordings”). I understand and agree that the Recordings may include Student’s image, voice and name.

I understand and agree that Harvard will have the irrevocable, worldwide right to make, edit, modify, copy, publish, transmit, distribute, sell, publicly display, publicly perform and otherwise use and make available the Recordings and any other works that may be derived from the Recordings, in any manner or medium now known or later invented, and to authorize others to do so as well. I agree that Harvard will own the Recordings and I hereby transfer to Harvard any rights, including copyrights, Student may have in the Recordings.

I acknowledge and agree that Student will not be entitled to any payment, now or in the future, in connection with the Recordings or any works derived from them. This Authorization is a binding agreement, and is signed as a document under seal governed by the laws of the Commonwealth of Massachusetts.

If Student is 18 or older: I agree to the terms set forth above.

Signature

Date

If Student is under 18: I, the undersigned parent or legal guardian of the Student, consent to the participation of the Student in the Recordings. As parent or guardian of the Student and on behalf of the Student, I agree to all the terms set forth above.

Signature

Date

Print Name