



**PHOTOGRAPHY/VIDEO RELEASE FORM**

I, Joseph Avenoso (name), understand that I am being photographed in connection with the 2012 Student Spaceflight Experiments Program National Conference.

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**If the subject of the photograph is a minor, this Release Form must be signed by a parent or legal guardian.**

Print name (if different from above)

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Address: 1111 Crim Rd, Bridgewater, NJ 08807

Email address: javenoso@optonline.net

Telephone: 908-685-1142

Signature: Joseph Avenoso

Date: June 10, 2012

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I, William Cane-Wissing (name), understand that I am being photographed in connection with the 2012 Student Spaceflight Experiments Program National Conference.

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Print name (if different from above)

\_\_\_\_\_

Address: 103 Warren Ave

Email address: gagelcane@gmail.com

Telephone: (908)595-9631

Signature: William Cane-Wissing

Date: 6/20/12

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I, Adam Elwood (name), understand that I am being photographed in connection with the 2012 Student Spaceflight Experiments Program National Conference.

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Print name (if different from above)

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Address: 21 Lawton Rd

Email address: AELWOOD09@HOTMAIL.COM

Telephone: 1(908) 872-8760

Signature: [Handwritten Signature]

Date: 6/19/12

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Print name (if different from above)

Address: 162 TANGLEWOOD PR.

Email address: JORGE@YSAP.ORG

Telephone: 1-908-279-4545

Signature: [Handwritten Signature]

Date: 6-22-12

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