



PHOTOGRAPHY/VIDEO RELEASE FORM

I, Austin Sadler (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)

Austin Sadler

Address: 2771 Faith Ave Battle Creek
Iowa

Email address: _____

Telephone: 712-365-4834

Signature: Carol Sadler

Date: 6-14-12

Office Use Only Identifying Features:

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I, Brittanie Rigby (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)

Brittanie Rigby

Address: Ida Grove IA 51445

Email address: _____

Telephone: 712-364-3849

Signature: Roy W. Abrecht

Date: 6-17-12

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Print name (if different from above)

Carol Sadler ✓

Address: 2771 Faith Ave

Email address: csadler@oabcig.org

Telephone: 712-365-4834

Signature: Carol Sadler

Date: 6-14-12

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I, Jessica Gunderson (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)

Jessica Gunderson

Address: 1393 360th Kiron Tower S1448

Email address: _____

Telephone: 712-6754348

Signature: Mary Gunderson

Date: 6/17/12

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Print name (if different from above)

Justin Sadler

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Email address: _____

Telephone: 712-365-4834

Signature: Carol Sadler

Date: 6-14-12

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