



FILM AND VIDEO RELEASE FORM

I, Craig Hyde (name), would like to attend a program at the National Air and Space Museum. I understand that the Smithsonian Institution will film, photograph, or otherwise record the program and publicly distribute such films, photographs, or other recordings via web-site, distance learning programming, and other publications related to the program or the Smithsonian and its activities. Possibly, my name, likeness, voice, statements, or image will be recorded in such film, photograph, or other recording.

In consideration of the opportunity to attend the program, I hereby agree to being filmed, photographed, or otherwise recorded while at the program and that the Smithsonian may use such recording including my name, likeness, voice, statements, or image for any educational, promotional, archival, or other standard museum purpose in any media now known or hereafter devised, in perpetuity, and without compensation or need for further permission or notification. The Smithsonian is under no obligation to film, photograph, or otherwise record me, or to use such recording if made of my name, likeness, voice, statements, or image.

In granting this permission, and in consideration of the opportunity to attend the program, I agree to release and hold harmless the Smithsonian, its regents, agents, and employees from any and all claims, actions, and demands of whatsoever nature, including but not limited to libel or privacy, arising out of the Smithsonian's use of such recording or my name, likeness, voice, statements, or image.

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

Print Name: Craig Hyde  
 Address: 6 Hastings Ln, Old Lyme, CT 06371  
 Email address: hydec01@comcast.net Telephone: 860-227-5766  
 Signature: [Signature] Date: 06/20/2013

**Privacy Notice**

The National Air and Space Museum is collecting this information in order to obtain your permission to be filmed, photographed or otherwise recorded. The Museum collects contact information such as your address; telephone number, etc. so that NASM is able to communicate with you. The Museum will only use your information for the purpose for which it was collected and will only share your contact information with Museum staff that have a need to know the information. Please note that the Smithsonian may also provide your information to: (1) a Federal, State, or local law enforcement agency if the Smithsonian becomes aware of a violation or potential violation of law or regulation; (2) a court or party in a court or Federal administrative proceeding if the Smithsonian is a party or in order to comply with a subpoena; (3) a member of the public in response to his or her request for Smithsonian records under Smithsonian Directive 807, available at [www.si.edu/ogc](http://www.si.edu/ogc); (4) the Department of Justice or in certain legal proceedings when the Smithsonian, an employee of the Smithsonian, or the United States is a party to litigation or has an interest in the litigation and the use of such records is deemed relevant and necessary to the litigation; (5) Smithsonian officials, including the Inspector General, as needed to perform official duties; (6) a Committee of Congress in response to a formal request; and (7) any other person or entity as required by law.



Smithsonian  
National Air and Space Museum

**FILM AND VIDEO RELEASE FORM**

I, Quintin Hyde (name), would like to attend a program at the National Air and Space Museum. I understand that the Smithsonian Institution will film, photograph, or otherwise record the program and publicly distribute such films, photographs, or other recordings via web-site, distance learning programming, and other publications related to the program or the Smithsonian and its activities. Possibly, my name, likeness, voice, statements, or image will be recorded in such film, photograph, or other recording.

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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: Quintin Hyde  
 Address: 6 Hastings Ln. Old Lyme, CT 06371  
 Email address: hydecq@comcast.net Telephone: 860-227-5766  
 Signature: Sy Hyde Date: 06/20/2013  
 (parent)

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FILM AND VIDEO RELEASE FORM

I, Nicholas Hyde (name), would like to attend a program at the National Air and Space Museum. I understand that the Smithsonian Institution will film, photograph, or otherwise record the program and publicly distribute such films, photographs, or other recordings via web-site, distance learning programming, and other publications related to the program or the Smithsonian and its activities. Possibly, my name, likeness, voice, statements, or image will be recorded in such film, photograph, or other recording.

In consideration of the opportunity to attend the program, I hereby agree to being filmed, photographed, or otherwise recorded while at the program and that the Smithsonian may use such recording including my name, likeness, voice, statements, or image for any educational, promotional, archival, or other standard museum purpose in any media now known or hereafter devised, in perpetuity, and without compensation or need for further permission or notification. The Smithsonian is under no obligation to film, photograph, or otherwise record me, or to use such recording if made of my name, likeness, voice, statements, or image.

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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: Nicholas Hyde  
 Address: 6 Hastings Cr., Old Lyme, CT 06371  
 Email address: hydec@comcast.net Telephone: 860-227-5766  
 Signature: G Y Hyde Date: 06/20/2013  
 (parent)

Privacy Notice

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**FILM AND VIDEO RELEASE FORM**

I, Glenn Penkoff Lidbeck (name), would like to attend a program at the National Air and Space Museum. I understand that the Smithsonian Institution will film, photograph, or otherwise record the program and publicly distribute such films, photographs, or other recordings via web-site, distance learning programming, and other publications related to the program or the Smithsonian and its activities. Possibly, my name, likeness, voice, statements, or image will be recorded in such film, photograph, or other recording.

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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: GLENN PENKOFF LIDBECK

Address: 11 EVANS LN, ESSEX CT

Email address: penkofflidbeck@me.com Telephone: 860-575-5999

Signature: Glenn Penkoff Lidbeck Date: 6/21/13

**Privacy Notice**

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**FILM AND VIDEO RELEASE FORM**

I, STASIA PENKOFFLIOBECK (name), would like to attend a program at the National Air and Space Museum. I understand that the Smithsonian Institution will film, photograph, or otherwise record the program and publicly distribute such films, photographs, or other recordings via web-site, distance learning programming, and other publications related to the program or the Smithsonian and its activities. Possibly, my name, likeness, voice, statements, or image will be recorded in such film, photograph, or other recording.

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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: STASIA PENKOFFLIOBECK

Address: 11 EVANS LN, ESSEX, CT 06426

Email address: SK2VT@me.com Telephone: 860-395-9966

Signature:  Date: 6/21/13

**Privacy Notice**

The National Air and Space Museum is collecting this information in order to obtain your permission to be filmed, photographed or otherwise recorded. The Museum collects contact information such as your address; telephone number, etc. so that NASM is able to communicate with you. The Museum will only use your information for the purpose for which it was collected and will only share your contact information with Museum staff that have a need to know the information. Please note that the Smithsonian may also provide your information to: (1) a Federal, State, or local law enforcement agency if the Smithsonian becomes aware of a violation or potential violation of law or regulation; (2) a court or party in a court or Federal administrative proceeding if the Smithsonian is a party or in order to comply with a subpoena; (3) a member of the public in response to his or her request for Smithsonian records under Smithsonian Directive 807, available at [www.si.edu/ogc](http://www.si.edu/ogc); (4) the Department of Justice or in certain legal proceedings when the Smithsonian, an employee of the Smithsonian, or the United States is a party to litigation or has an interest in the litigation and the use of such records is deemed relevant and necessary to the litigation; (5) Smithsonian officials, including the Inspector General, as needed to perform official duties; (6) a Committee of Congress in response to a formal request; and (7) any other person or entity as required by law.



**FILM AND VIDEO RELEASE FORM**

I, Nadia Penkofflidbeck (name), would like to attend a program at the National Air and Space Museum. I understand that the Smithsonian Institution will film, photograph, or otherwise record the program and publicly distribute such films, photographs, or other recordings via web-site, distance learning programming, and other publications related to the program or the Smithsonian and its activities. Possibly, my name, likeness, voice, statements, or image will be recorded in such film, photograph, or other recording.

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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: Nadia Penkofflidbeck

Address: 11 Evans Ln, Essex, CT 06426

Email address: \_\_\_\_\_ Telephone: 860-395-9966

Signature: Nadia Penkofflidbeck Date: 6/21/13

**Privacy Notice**

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**FILM AND VIDEO RELEASE FORM**

I, ANASTASIA ELLIOTT (name), would like to attend a program at the National Air and Space Museum. I understand that the Smithsonian Institution will film, photograph, or otherwise record the program and publicly distribute such films, photographs, or other recordings via web-site, distance learning programming, and other publications related to the program or the Smithsonian and its activities. Possibly, my name, likeness, voice, statements, or image will be recorded in such film, photograph, or other recording.

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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: ANASTASIA ELLIOTT

Address: 11 EVANS LN ESSEX CT 06426

Email address: anostira@gmail.com Telephone: 860-575-3902

Signature: Anastasia Elliott Date: 2/20/13

**Privacy Notice**

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**FILM AND VIDEO RELEASE FORM**

I, Keith Hall (name), would like to attend a program at the National Air and Space Museum. I understand that the Smithsonian Institution will film, photograph, or otherwise record the program and publicly distribute such films, photographs, or other recordings via web-site, distance learning programming, and other publications related to the program or the Smithsonian and its activities. Possibly, my name, likeness, voice, statements, or image will be recorded in such film, photograph, or other recording.

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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: Keith Hall

Address: 35 Webster Rd., E. Lyme, Ct 06373

Email address: massadaj@aol.com Telephone: 860-235-2770

Signature: Keith J. Hall Date: 6/20/13

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**FILM AND VIDEO RELEASE FORM**

I, Andrea Hall (name), would like to attend a program at the National Air and Space Museum. I understand that the Smithsonian Institution will film, photograph, or otherwise record the program and publicly distribute such films, photographs, or other recordings via web-site, distance learning programming, and other publications related to the program or the Smithsonian and its activities. Possibly, my name, likeness, voice, statements, or image will be recorded in such film, photograph, or other recording.

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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: Andrea Hall

Address: 35 Webster Rd, E. Lyme, Gt 06333

Email address: massadaj@aol.com Telephone: 860-235-2770

Signature: [Signature] Date: 6/20/13

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**FILM AND VIDEO RELEASE FORM**

I, Marissa Hall (name), would like to attend a program at the National Air and Space Museum. I understand that the Smithsonian Institution will film, photograph, or otherwise record the program and publicly distribute such films, photographs, or other recordings via web-site, distance learning programming, and other publications related to the program or the Smithsonian and its activities. Possibly, my name, likeness, voice, statements, or image will be recorded in such film, photograph, or other recording.

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Print Name: Marissa Hall

Address: 35 Webster Rd, E. Lyme, CT 06333

Email address: massadaj@aol.com Telephone: 860-235-2770

Signature: [Signature] Andrea Hall Date: 6/20/13  
(for Marissa)

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**FILM AND VIDEO RELEASE FORM**

I, Sally Bell (name), would like to attend a program at the National Air and Space Museum. I understand that the Smithsonian Institution will film, photograph, or otherwise record the program and publicly distribute such films, photographs, or other recordings via web-site, distance learning programming, and other publications related to the program or the Smithsonian and its activities. Possibly, my name, likeness, voice, statements, or image will be recorded in such film, photograph, or other recording.

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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: Sally Bell

Address: 1509 Baychester Ct, Alexandria, VA 22303

Email address: sallybell@yahoo.com Telephone: 860-235-2770

Signature: Sally Bell Date: 6/20/13

**Privacy Notice**

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**FILM AND VIDEO RELEASE FORM**

I, Christine Gurham (name), would like to attend a program at the National Air and Space Museum. I understand that the Smithsonian Institution will film, photograph, or otherwise record the program and publicly distribute such films, photographs, or other recordings via web-site, distance learning programming, and other publications related to the program or the Smithsonian and its activities. Possibly, my name, likeness, voice, statements, or image will be recorded in such film, photograph, or other recording.

In consideration of the opportunity to attend the program, I hereby agree to being filmed, photographed, or otherwise recorded while at the program and that the Smithsonian may use such recording including my name, likeness, voice, statements, or image for any educational, promotional, archival, or other standard museum purpose in any media now known or hereafter devised, in perpetuity, and without compensation or need for further permission or notification. The Smithsonian is under no obligation to film, photograph, or otherwise record me, or to use such recording if made or my name, likeness, voice, statements, or image.

In granting this permission, and in consideration of the opportunity to attend the program, I agree to release and hold harmless the Smithsonian, its regents, agents, and employees from any and all claims, actions, and demands of whatsoever nature, including but not limited to libel or privacy, arising out of the Smithsonian's use of such recording or my name, likeness, voice, statements, or image.

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

Print Name: Christine Gurham

Address: 1509 Banchester Ct., Alexandria, VA 22303

Email address: Sallybell@yahoo.com Telephone: 860-235-2770

Signature: [Signature] Date: 6/20/13

**Privacy Notice**

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**FILM AND VIDEO RELEASE FORM**

I, Cheyenne Gorham (name), would like to attend a program at the National Air and Space Museum. I understand that the Smithsonian Institution will film, photograph, or otherwise record the program and publicly distribute such films, photographs, or other recordings via web-site, distance learning programming, and other publications related to the program or the Smithsonian and its activities. Possibly, my name, likeness, voice, statements, or image will be recorded in such film, photograph, or other recording.

In consideration of the opportunity to attend the program, I hereby agree to being filmed, photographed, or otherwise recorded while at the program and that the Smithsonian may use such recording including my name, likeness, voice, statements, or image for any educational, promotional, archival, or other standard museum purpose in any media now known or hereafter devised, in perpetuity, and without compensation or need for further permission or notification. The Smithsonian is under no obligation to film, photograph, or otherwise record me, or to use such recording if made or my name, likeness, voice, statements, or image.

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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: Cheyenne Gorham

Address: 1509 Boychester Ct, Alexandria VA 22303

Email address: sallybell@yahoo.com Telephone: 860-235-2770

Signature: minor [signature] Date: 6/20/13

**Privacy Notice**

The National Air and Space Museum is collecting this information in order to obtain your permission to be filmed, photographed or otherwise recorded. The Museum collects contact information such as your address; telephone number, etc. so that NASM is able to communicate with you. The Museum will only use your information for the purpose for which it was collected and will only share your contact information with Museum staff that have a need to know the information. Please note that the Smithsonian may also provide your information to: (1) a Federal, State, or local law enforcement agency if the Smithsonian becomes aware of a violation or potential violation of law or regulation; (2) a court or party in a court or Federal administrative proceeding if the Smithsonian is a party or in order to comply with a subpoena; (3) a member of the public in response to his or her request for Smithsonian records under Smithsonian Directive 807, available at [www.si.edu/ogc](http://www.si.edu/ogc); (4) the Department of Justice or in certain legal proceedings when the Smithsonian, an employee of the Smithsonian, or the United States is a party to litigation or has an interest in the litigation and the use of such records is deemed relevant and necessary to the litigation; (5) Smithsonian officials, including the Inspector General, as needed to perform official duties; (6) a Committee of Congress in response to a formal request; and (7) any other person or entity as required by law.



**FILM AND VIDEO RELEASE FORM**

I, Devon Gorham (name), would like to attend a program at the National Air and Space Museum. I understand that the Smithsonian Institution will film, photograph, or otherwise record the program and publicly distribute such films, photographs, or other recordings via web-site, distance learning programming, and other publications related to the program or the Smithsonian and its activities. Possibly, my name, likeness, voice, statements, or image will be recorded in such film, photograph, or other recording.

In consideration of the opportunity to attend the program, I hereby agree to being filmed, photographed, or otherwise recorded while at the program and that the Smithsonian may use such recording including my name, likeness, voice, statements, or image for any educational, promotional, archival, or other standard museum purpose in any media now known or hereafter devised, in perpetuity, and without compensation or need for further permission or notification. The Smithsonian is under no obligation to film, photograph, or otherwise record me, or to use such recording if made of my name, likeness, voice, statements, or image.

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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: Devon Gorham

Address: 1509 Baychester Ct, Alexandria, VA 22303

Email address: sallybell@yahoo.com Telephone: 860-235-2770

Signature (minor) [Signature] Date: 6/20/13

**Privacy Notice**

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**FILM AND VIDEO RELEASE FORM**

I, Stephen Massad (name), would like to attend a program at the National Air and Space Museum. I understand that the Smithsonian Institution will film, photograph, or otherwise record the program and publicly distribute such films, photographs, or other recordings via web-site, distance learning programming, and other publications related to the program or the Smithsonian and its activities. Possibly, my name, likeness, voice, statements, or image will be recorded in such film, photograph, or other recording.

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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: Stephen Massad

Address: 2093 Game Mews Place, Alexandria, VA 22303

Email address: massad.stephen@gmail.com Telephone: 860-235-2770

Signature: Stephen Massad Date: 6/20/13

**Privacy Notice**

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**FILM AND VIDEO RELEASE FORM**

I, Jennie Massad (name), would like to attend a program at the National Air and Space Museum. I understand that the Smithsonian Institution will film, photograph, or otherwise record the program and publicly distribute such films, photographs, or other recordings via web-site, distance learning programming, and other publications related to the program or the Smithsonian and its activities. Possibly, my name, likeness, voice, statements, or image will be recorded in such film, photograph, or other recording.

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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: Jennie Massad

Address: 2093 Lanna Mews Pl, Alexandria VA 22303

Email address: massad.stephen@gmail.com Telephone: 860-235-2770

Signature: [Handwritten Signature] Date: 6/20/13

**Privacy Notice**

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FILM AND VIDEO RELEASE FORM

I, ADETUNJI A. OLAWOLE (name), would like to attend a program at the National Air and Space Museum. I understand that the Smithsonian Institution will film, photograph, or otherwise record the program and publicly distribute such films, photographs, or other recordings via web-site, distance learning programming, and other publications related to the program or the Smithsonian and its activities. Possibly, my name, likeness, voice, statements, or image will be recorded in such film, photograph, or other recording.

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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: ADETUNJI ADETAYO OLAWOLE

Address: 6 CHADWICK PLACE NIAWIC CT 06357

Email address: olawoleadetayo@photo.com Telephone: 401-226-6152

Signature: [Signature] Date: 06/20/13

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**FILM AND VIDEO RELEASE FORM**

I, Joane M. Olawale (name), would like to attend a program at the National Air and Space Museum. I understand that the Smithsonian Institution will film, photograph, or otherwise record the program and publicly distribute such films, photographs, or other recordings via web-site, distance learning programming, and other publications related to the program or the Smithsonian and its activities. Possibly, my name, likeness, voice, statements, or image will be recorded in such film, photograph, or other recording.

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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: Joane M. Olawale

Address: 6 Chadwick Place, Niantic, CT 06357

Email address: Jolawale@Jmolawfirm.com Telephone: 401-226-6153

Signature: Joane M. Olawale Date: 6-20-13

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**FILM AND VIDEO RELEASE FORM**

I, Moriah Olawale (name), would like to attend a program at the National Air and Space Museum. I understand that the Smithsonian Institution will film, photograph, or otherwise record the program and publicly distribute such films, photographs, or other recordings via web-site, distance learning programming, and other publications related to the program or the Smithsonian and its activities. Possibly, my name, likeness, voice, statements, or image will be recorded in such film, photograph, or other recording.

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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: Joane M. Olawale

Address: 6 Chadwick Place Niantic, CT 06357

Email address: Jolawale@smolawfirm.com Telephone: 401-226-6153

Signature: Joane M. Olawale Date: 6-20-13

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**FILM AND VIDEO RELEASE FORM**

I, Maximilian Olawale (name), would like to attend a program at the National Air and Space Museum. I understand that the Smithsonian Institution will film, photograph, or otherwise record the program and publicly distribute such films, photographs, or other recordings via web-site, distance learning programming, and other publications related to the program or the Smithsonian and its activities. Possibly, my name, likeness, voice, statements, or image will be recorded in such film, photograph, or other recording.

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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: Joane M. Olawale

Address: 6 Chadwick Place, Niantic, CT 06357

Email address: Jolawale@Imokiofirm.com Telephone: 401-226-6153

Signature: Joane M. Olawale Date: 6-20-13

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FILM AND VIDEO RELEASE FORM

I, Rash Barnhart (name), would like to attend a program at the National Air and Space Museum. I understand that the Smithsonian Institution will film, photograph, or otherwise record the program and publicly distribute such films, photographs, or other recordings via web-site, distance learning programming, and other publications related to the program or the Smithsonian and its activities. Possibly, my name, likeness, voice, statements, or image will be recorded in such film, photograph, or other recording.

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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: Kristin Barnhart

Address: 13 Louise Dr. Niantic, CT 06357

Kristin.barnhart@ct.  
Email address: metrocast.net Telephone: 860.691.0458

Signature: Kristin Barnhart Date: 6/19/13

Privacy Notice

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**FILM AND VIDEO RELEASE FORM**

I, Grace Barnhart (name), would like to attend a program at the National Air and Space Museum. I understand that the Smithsonian Institution will film, photograph, or otherwise record the program and publicly distribute such films, photographs, or other recordings via web-site, distance learning programming, and other publications related to the program or the Smithsonian and its activities. Possibly, my name, likeness, voice, statements, or image will be recorded in such film, photograph, or other recording.

In consideration of the opportunity to attend the program, I hereby agree to being filmed, photographed, or otherwise recorded while at the program and that the Smithsonian may use such recording including my name, likeness, voice, statements, or image for any educational, promotional, archival, or other standard museum purpose in any media now known or hereafter devised, in perpetuity, and without compensation or need for further permission or notification. The Smithsonian is under no obligation to film, photograph, or otherwise record me, or to use such recording if made or my name, likeness, voice, statements, or image.

In granting this permission, and in consideration of the opportunity to attend the program, I agree to release and hold harmless the Smithsonian, its regents, agents, and employees from any and all claims, actions, and demands of whatsoever nature, including but not limited to libel or privacy, arising out of the Smithsonian's use of such recording or my name, likeness, voice, statements, or image.

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

Print Name: Kristin Barnhart

Address: 13 Louise Dr Niantic CT 06357  
Kristin.barnhart@ct. metrocast.net Telephone: 860.691.0458

Signature: Kristin Barnhart Date: 6/20/13

**Privacy Notice**

The National Air and Space Museum is collecting this information in order to obtain your permission to be filmed, photographed or otherwise recorded. The Museum collects contact information such as your address; telephone number, etc. so that NASM is able to communicate with you. The Museum will only use your information for the purpose for which it was collected and will only share your contact information with Museum staff that have a need to know the information. Please note that the Smithsonian may also provide your information to: (1) a Federal, State, or local law enforcement agency if the Smithsonian becomes aware of a violation or potential violation of law or regulation; (2) a court or party in a court or Federal administrative proceeding if the Smithsonian is a party or in order to comply with a subpoena; (3) a member of the public in response to his or her request for Smithsonian records under Smithsonian Directive 807, available at [www.si.edu/ogc](http://www.si.edu/ogc); (4) the Department of Justice or in certain legal proceedings when the Smithsonian, an employee of the Smithsonian, or the United States is a party to litigation or has an interest in the litigation and the use of such records is deemed relevant and necessary to the litigation; (5) Smithsonian officials, including the Inspector General, as needed to perform official duties; (6) a Committee of Congress in response to a formal request; and (7) any other person or entity as required by law.



**FILM AND VIDEO RELEASE FORM**

I, Richard Barnhart (name), would like to attend a program at the National Air and Space Museum. I understand that the Smithsonian Institution will film, photograph, or otherwise record the program and publicly distribute such films, photographs, or other recordings via web-site, distance learning programming, and other publications related to the program or the Smithsonian and its activities. Possibly, my name, likeness, voice, statements, or image will be recorded in such film, photograph, or other recording.

In consideration of the opportunity to attend the program, I hereby agree to being filmed, photographed, or otherwise recorded while at the program and that the Smithsonian may use such recording including my name, likeness, voice, statements, or image for any educational, promotional, archival, or other standard museum purpose in any media now known or hereafter devised, in perpetuity, and without compensation or need for further permission or notification. The Smithsonian is under no obligation to film, photograph, or otherwise record me, or to use such recording if made of my name, likeness, voice, statements, or image.

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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: Richard W. Barnhart

Address: 13 Louise Drive

richard.barnhart@pfizer.com  
Email address: \_\_\_\_\_ Telephone: 860-691-0458

Signature: [Signature] Date: June 20, 2013

**Privacy Notice**

The National Air and Space Museum is collecting this information in order to obtain your permission to be filmed, photographed or otherwise recorded. The Museum collects contact information such as your address; telephone number, etc. so that NASM is able to communicate with you. The Museum will only use your information for the purpose for which it was collected and will only share your contact information with Museum staff that have a need to know the information. Please note that the Smithsonian may also provide your information to: (1) a Federal, State, or local law enforcement agency if the Smithsonian becomes aware of a violation or potential violation of law or regulation; (2) a court or party in a court or Federal administrative proceeding if the Smithsonian is a party or in order to comply with a subpoena; (3) a member of the public in response to his or her request for Smithsonian records under Smithsonian Directive 807, available at [www.si.edu/ogc](http://www.si.edu/ogc); (4) the Department of Justice or in certain legal proceedings when the Smithsonian, an employee of the Smithsonian, or the United States is a party to litigation or has an interest in the litigation and the use of such records is deemed relevant and necessary to the litigation; (5) Smithsonian officials, including the Inspector General, as needed to perform official duties; (6) a Committee of Congress in response to a formal request; and (7) any other person or entity as required by law.



**FILM AND VIDEO RELEASE FORM**

Kristin Barnhart (name), would like to attend a program at the National Air and Space Museum. I understand that the Smithsonian Institution will film, photograph, or otherwise record the program and publicly distribute such films, photographs, or other recordings via web-site, distance learning programming, and other publications related to the program or the Smithsonian and its activities. Possibly, my name, likeness, voice, statements, or image will be recorded in such film, photograph, or other recording.

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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: Kristin Barnhart

Address: 13 Louise Drive Niantk CT 06357

Kristin.barnhart@ct.  
Email address: metacast.net Telephone: 860.691.0458

Signature: Kristin Barnhart Date: 6/20/13

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Smithsonian  
National Air and Space Museum

FILM AND VIDEO RELEASE FORM

I, KAREN B. CHUTTER (name), would like to attend a program at the National Air and Space Museum. I understand that the Smithsonian Institution will film, photograph, or otherwise record the program and publicly distribute such films, photographs, or other recordings via web-site, distance learning programming, and other publications related to the program or the Smithsonian and its activities. Possibly, my name, likeness, voice, statements, or image will be recorded in such film, photograph, or other recording.

In consideration of the opportunity to attend the program, I hereby agree to being filmed, photographed, or otherwise recorded while at the program and that the Smithsonian may use such recording including my name, likeness, voice, statements, or image for any educational, promotional, archival, or other standard museum purpose in any media now known or hereafter devised, in perpetuity, and without compensation or need for further permission or notification. The Smithsonian is under no obligation to film, photograph, or otherwise record me, or to use such recording if made or my name, likeness, voice, statements, or image.

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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: KAREN B. CHUTTER

Address: 644 ABBEY MILL DRIVE SE, ADA, MI 49301

Email address: KCHUTTER@COMCAST.NET Telephone: 616-942-0524

Signature: *Karen B. Chutter* Date: 06-20-13

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The National Air and Space Museum is collecting this information in order to obtain your permission to be filmed, photographed or otherwise recorded. The Museum collects contact information such as your address; telephone number, etc. so that NASM is able to communicate with you. The Museum will only use your information for the purpose for which it was collected and will only share your contact information with Museum staff that have a need to know the information. Please note that the Smithsonian may also provide your information to: (1) a Federal, State, or local law enforcement agency if the Smithsonian becomes aware of a violation or potential violation of law or regulation; (2) a court or party in a court or Federal administrative proceeding if the Smithsonian is a party or in order to comply with a subpoena; (3) a member of the public in response to his or her request for Smithsonian records under Smithsonian Directive 807, available at [www.si.edu/ogc](http://www.si.edu/ogc); (4) the Department of Justice or in certain legal proceedings when the Smithsonian, an employee of the Smithsonian, or the United States is a party to litigation or has an interest in the litigation and the use of such records is deemed relevant and necessary to the litigation; (5) Smithsonian officials, including the Inspector General, as needed to perform official duties; (6) a Committee of Congress in response to a formal request; and (7) any other person or entity as required by law.



Smithsonian  
National Air and Space Museum

FILM AND VIDEO RELEASE FORM

I, ROGER CHUTTER (name), would like to attend a program at the National Air and Space Museum. I understand that the Smithsonian Institution will film, photograph, or otherwise record the program and publicly distribute such films, photographs, or other recordings via web-site, distance learning programming, and other publications related to the program or the Smithsonian and its activities. Possibly, my name, likeness, voice, statements, or image will be recorded in such film, photograph, or other recording.

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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: ROGER CHUTTER

Address: 644 ABBEY MILL DRIVE SE, ADA, MI 49301

Email address: KCHUTTER@COMCAST.NET Telephone: 616-942-0524

Signature: Roger Chutter Date: 06-20-13

Privacy Notice

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FILM AND VIDEO RELEASE FORM

I, MAKATH JORDAN OLAWALE (name), would like to attend a program at the National Air and Space Museum. I understand that the Smithsonian Institution will film, photograph, or otherwise record the program and publicly distribute such films, photographs, or other recordings via web-site, distance learning programming, and other publications related to the program or the Smithsonian and its activities. Possibly, my name, likeness, voice, statements, or image will be recorded in such film, photograph, or other recording.

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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: Adetunji Adetayo Olawale

Address: 6 Chadwick Place Niantic CT 06357

Email address: Olawaleadetayo@yahoo.com Telephone: 401 226-6152

Signature:  Date: 06/20/13

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**FILM AND VIDEO RELEASE FORM**

I, Nick Hyde (name), would like to attend a program at the National Air and Space Museum. I understand that the Smithsonian Institution will film, photograph, or otherwise record the program and publicly distribute such films, photographs, or other recordings via web-site, distance learning programming, and other publications related to the program or the Smithsonian and its activities. Possibly, my name, likeness, voice, statements, or image will be recorded in such film, photograph, or other recording.

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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: Nick Hyde (mother: Cecilia FOSSE)  
 Address: 10 S LEDGE ROCK RD, NANTIC, CT 06357  
 Email address: ceciliafosser@yahoo.com Telephone: 860-227-5746  
 Signature: [Signature] Date: 20 JUNE 2013

**Privacy Notice**

The National Air and Space Museum is collecting this information in order to obtain your permission to be filmed, photographed or otherwise recorded. The Museum collects contact information such as your address; telephone number, etc. so that NASM is able to communicate with you. The Museum will only use your information for the purpose for which it was collected and will only share your contact information with Museum staff that have a need to know the information. Please note that the Smithsonian may also provide your information to: (1) a Federal, State, or local law enforcement agency if the Smithsonian becomes aware of a violation or potential violation of law or regulation; (2) a court or party in a court or Federal administrative proceeding if the Smithsonian is a party or in order to comply with a subpoena; (3) a member of the public in response to his or her request for Smithsonian records under Smithsonian Directive 807, available at [www.si.edu/ogc](http://www.si.edu/ogc); (4) the Department of Justice or in certain legal proceedings when the Smithsonian, an employee of the Smithsonian, or the United States is a party to litigation or has an interest in the litigation and the use of such records is deemed relevant and necessary to the litigation; (5) Smithsonian officials, including the Inspector General, as needed to perform official duties; (6) a Committee of Congress in response to a formal request; and (7) any other person or entity as required by law.



**FILM AND VIDEO RELEASE FORM**

I, Brandon Hall (name), would like to attend a program at the National Air and Space Museum. I understand that the Smithsonian Institution will film, photograph, or otherwise record the program and publicly distribute such films, photographs, or other recordings via web-site, distance learning programming, and other publications related to the program or the Smithsonian and its activities. Possibly, my name, likeness, voice, statements, or image will be recorded in such film, photograph, or other recording.

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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: Brandon Hall (by Andrea Hall)

Address: 35 Webster Rd, E. Lyme, Ct 06333

Email address: massada.j@aol.com Telephone: 860-641-0152

Signature: [Signature] Date: 6-19-13  
(parent)

**Privacy Notice**

The National Air and Space Museum is collecting this information in order to obtain your permission to be filmed, photographed or otherwise recorded. The Museum collects contact information such as your address; telephone number, etc. so that NASM is able to communicate with you. The Museum will only use your information for the purpose for which it was collected and will only share your contact information with Museum staff that have a need to know the information. Please note that the Smithsonian may also provide your information to: (1) a Federal, State, or local law enforcement agency if the Smithsonian becomes aware of a violation or potential violation of law or regulation; (2) a court or party in a court or Federal administrative proceeding if the Smithsonian is a party or in order to comply with a subpoena; (3) a member of the public in response to his or her request for Smithsonian records under Smithsonian Directive 807, available at [www.si.edu/ogc](http://www.si.edu/ogc); (4) the Department of Justice or in certain legal proceedings when the Smithsonian, an employee of the Smithsonian, or the United States is a party to litigation or has an interest in the litigation and the use of such records is deemed relevant and necessary to the litigation; (5) Smithsonian officials, including the Inspector General, as needed to perform official duties; (6) a Committee of Congress in response to a formal request; and (7) any other person or entity as required by law.