

PARENT/GUARDIAN PERMISSION & MEDIA RELEASE FORM

YouthBridge		(Student Name) to participate in t will be held on Friday, March 20 th , 2020 at UJA-Federation	held on Friday, March 20 th , 2020 at UJA-Federation of	
I understand release and officers, em interest and	d that appropriate supervision will be hold harmless the Jewish Community ployees, and volunteers, from any	provided by the student's school or organization. I agree Relations Council of NY and YouthBridge-NY, their ager and all liability, claims, suits, demands, judgments, co d costs arising from such activities, including any accident	nts, sts,	
Council of N photograph media now o public educa am not entit the sole own	ew York, Inc. ("JCRC-NY"), and those as and to make recordings of my child/wor hereafter known, with or without the ation, and/or fundraising activities of Journal of the compensation for the	YouthBridge-NY and the Jewish Community Relations authorized by JCRC-NY and YouthBridge-NY, to take ward, and to use them in original or modified form in all eir name or information about them, for the promotion, CRC-NY and YouthBridge-NY. I understand and agree that he above. I agree that JCRC-NY and YouthBridge-NY will be in the above-mentioned photographs and recordings, with	e	
	EMERGENCY (CONTACT INFORMATION		
Home/Work	/Cell Phone			
Allergies & N	1edications			
Parent /Guardian (Print)		Parent/Guardian Name (Signature)		
Date THIS FOR	 RM IS DUE BY Friday, February 21st. Giv	e this form back to the teacher/supervisor or send directly to:		
EMAIL TO:	YouthBridgeNY@gmail.com	QUESTIONS? Karen Lander		
FAX TO:	212-983-4084	212-983-4800 x145		
MAIL TO:	YouthBridge-NY Attn: Karen Lander	Samantha Klein		
	225 West 34 th St, Suite 1607	212-983-4800 X120		

New York, NY 10122